

Agriculture and Agriculture et Agri-Food Canada Agroalimentaire Canada

# **RURAL SECRETARIAT - NETWORKING INITIATIVE LEARNING EVENT - APPLICATION FORM FOR FUNDING**

## PLEASE READ "GUIDELINES FOR APPLICANTS" PRIOR TO THE COMPLETION OF THIS FORM

## **REQUIREMENTS MUST BE MET IN ORDER FOR YOUR APPLICATION TO BE CONSIDERED FOR FUNDING:**

- Application must comply with the Networking Initiative's objectives and criteria;
- Application funding request is not to exceed 1/3 of the total project cost, maximum funding request is \$15,000;
- Applicant must demonstrate that the project fits within the Learning Events category;
- Applicant must forward the signed Declaration of Applicant page by mail or fax to the Rural Secretariat;
- Applicant must be a legal entity under Canadian law and capable of entering into a binding contract;
- Application should be submitted at least 90 days prior to the work being undertaken.

### WHEN COMPLETING THE APPLICATION:

- Responses should be brief and clear. Please note that the level of detail required should be reflective of the amount of funding requested. Add or delete extra rows as required.

PROJECT AND APPLICANT INFORMATION					For Office Use Only	
1.	1. Title of Event					
2.	Name of Organization GST or C.R.A. number					
3.	Event Location	(community, town, re	gion, province/territ	ory)		-
4.	Contact Name: Title: Address (mailing and street addresses, if different): Phone: Fax: Email: Website:					
5.	Name and title of the       Name: Title:         "Signing       Address (mailing and street addresses, if different):         Authority" if       Phone:         not the person       Fax:         listed above       Email:					Is the event
6.	Website:       Event Date(s)     Project Duration (anticipated start and completion date of project)			red start and completion date of	within a time period that can be accommodated?	
7.	7. Amount of funding requested (not to exceed 1/3 of the total project cost, maximum of \$15,000) Total Project Cost				% of budget requested from the NI	
8. What type of organization do you represent?      Canadian Individual;Canadian Non-Profit organization;Co-operative association;      Educational Institution;						Eligible Not eligible

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9.	What is the need in the community that your event is addressing? For example, what issue facing the community will be improved or changed by this event? How did you determine that the event was needed?	Community Capacity Building
		L M H
10.	What is the objective of your event?	
11.	<b>Describe your learning event</b> Who will attend (eg: 40 youth from xyz community)? What learning methods, tools and other resources will you be using? (eg: presentation and discussion forum, with workbooks and take-home application tools)	
12.	What are the expected changes or impacts you anticipate from your event? Immediate or short-term (<6 months)	
	Medium-term (6 months to 2 years)	

Please note: A simple evaluation & performance measurement plan is expected as reflective of the funding requested. As noted in the Networking Initiative Guidelines, the evaluation should measure how the event's content and/or process adds value to knowledge, understanding and tools for rural community capacity building.

13	How will you know the extent to which your event made a difference? What indicators will you use? Quantitative example: number of participants compared to the number expected. Qualitative example: participants will be asked to describe how they will use their new knowledge in the community. Others?			an nce
		L :	M	H 
14	• What method will you use to measure the indicators listed above? What evaluation tool will you use? (eg: questionnaire of participants, post-event survey of participants, etc.)			

	For O	office U	se Only
15. Who in the community is supportive of/involved in your event, and in what way?	Comr	nunity	Impact
	L	М	Н
<b>16.</b> How are the results being shared? What is your communication plan for your event results, if applicable?			

17.	7. Background of your organization Please provide the: mandate, date organization formed, number of employees/volunteers, accomplishments, memberships; or a website address where the information is located.			)
		L 	M 	H 
18.	Event team Who is working on your event and what is their role?			
19.	Briefly list the key activities and associated time lines. (Or attach your work plan, if available)			
20.	Describe any challenges that may influence the successful completion of the proposed project, and			
	how you plan to mitigate those challenges.			

<ul> <li><b>REFERENCES:</b> Provide the name, title, organizations represented, and telephone number of at least two references that we can consult with about this event and your organization. Your references should be people who:</li> <li>will collaborate in event/project activities; or</li> <li>are familiar with the situation or issue in the community; or</li> <li>are recommending or potentially recommending funding to the project/event; or have worked with your organization in the past and can comment on your ability to carry out this project.</li> </ul>	For Office Use Only
References	

SOURCES OF FUNDING						
Funding Sources	Cash \$	In-kind \$ value	Confirmed Yes/No	For Office Use Only		
Networking Initiative Funding Requested	xx,xxx					
Applicant's Contribution	xx,xxx					
<b>Government Sources of Funding</b> (federal, provincial/territorial and municipal): ( <i>Total government funding, including Networking Initiative funding, not to exceed 80% of the total project costs</i> ) For example: Western Economic Diversification Canada (WED) Industry Canada City of ABC	xx,xxx xx,xxx	x,xxx		% With NI request, not to exceed 80% of total project costs		
Non-Government Sources of Funding: For example: A&B Printers C&D Bank E&F Insurance Co.	x,xxx xx,xxx xx,xxx	x,xxx				
TOTAL SOURCES OF FUNDING						

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<b>Funding Support Letters Required</b> : Copies of funding partners letters confirming the amount of support to be funded are required as evidence of financial and/or in-kind partnerships. Funding support letters should cover an amount that is at least double Networking Initiative amount requested.	Included	Not included

#### **PROJECT BUDGET**

Only incremental, eligible costs directly related to the project can be funded and will be considered. Incremental means the increase in expenditures as a direct result of the project being funded. Eligible costs may include incremental expenses for: contracted goods and services; materials and supplies; federal and provincial taxes (including the non refundable portion of GST); labour or salaried services and related employment costs; audit and performance reporting as required by the Networking Initiative; rental or lease of facilities, equipment or machinery; and other non-capital costs you would want to have considered.

Cost Categories (Examples of expenditures that can be funded through the Networking Initiative are provided in the attached table at the end of the application)	Total Activity Cost \$	Networking Initiative Funding Requested	Other Funding Sources
For example: Facilities rental	x,xxx		WED
For example: Travel	x,xxx		WED E&F Insurance
TOTAL PROJECT COSTS			

### **DECLARATION OF APPLICANT**

### (This declaration must be completed prior to processing of your application).

#### UNPAID DEBTS TO CANADA

It is a requirement of the Treasury Board Policy on Transfer Payments that recipients of government funding declare any amounts owing to the federal government. (Refer to TB Web Site: www.tbs-sct.gc.ca/pubs\_pol/dcgpubs/TBM\_142/ptp\_e.asp)

Does your organization have any outstanding debts with th	e Government of Canada?	_YESNO
If yes, please indicate the amount owing and under what program/legislation	Amount of unpaid debt	Program/Legislation

## CONFLICT OF INTEREST DISCLOSURE

Applicants must comply with the Values and Ethics Code of the Public Service related to Measures on Conflict of Interest and Post-Employment. (Refer to Chapters 2 & 3 of the TB document at: www.tbs-sct.gc.ca/veo-bve/vec-cve/vec-cbe\_e.asp)

Provide the names of anyone involved with this project who has in the past year been employed with, or held public office with the federal government. Indicate tier former position(s) and the nature of their involvement in your organization.

Name	Former Position	Nature of involvement

## **DECLARATION OF APPLICANT**

I/We agree and understand that:

- Information provided in the proposal form will be collected and used by Agriculture and Agri-Food Canada (AAFC) to determine eligibility for funding under the Networking Initiative;
- Information provided to AAFC herein is subject to the Access to Information Act;
- Any financial, commercial, scientific or technical information provided in this proposal will be treated in confidence;
- Any personal information provided in this proposal will be protected by the *Privacy Act* and will be used only for the purposes for which it is collected;
- Information provided about the project may be published on the Rural Secretariat web site in the event that the project is approved for funding;
- Information may be disclosed to third parties for purposes of assessing the proposal funding; and
- This application form creates no obligation on the part of AAFC to provide funding.

I/We declare that the information given in this application is to the best of the applicant's knowledge, complete, true and correct. I/We will be required to enter into an agreement in the event that this application is approved.

**Authorized Representative Signature** 

Title

Date

FOR

Name of Organization

## INFORMATION

For information, please contact the Rural Secr	retariat Program Officer in	n your region by using our	Toll free Number
1-877-295-7160.			

Applicants should mail or fax a signed copy of the Application for Funding form, along with an electronic copy, if possible, to the Rural Secretariat Program Officer in your region (see <u>http://www.rural.gc.ca/programs/netwroking\_e.phtml?content=contact#contat</u>) or to:

Networking Initiative Rural Secretariat, Agriculture and Agri-Food Canada Room 6207, 6<sup>th</sup> Floor, Tower 7 1341 Baseline Road Ottawa, Ontario K1A 0C5 Fax: (613) 759-1204

COMPLETENESS OF PROPOSAL			For Office Use Only		
	YES	NO		YES	NO
Event objectives			Evaluation plan		
Expected outcomes or impact			Sources of Funding and Project Budget		
Description of organization (including a description of the roles and responsibilities for employees and volunteers working on the project)			Funding partners letters - evidence of financial and/or in-kind partnerships (at least double Networking Initiative amount requested)		
Budget and work plan with time frames			Signed Declaration of Applicant form		

REVIEWERS COMMENTS	For Office Use Only
Which policy area/priority issue does this proposal meet?	
Was there any consultation done with other federal departments and/or regional agencies?	
Comments or conditions (if applicable):	
Recommendation:	
Program Officer Date:	
Senior Policy Advisor Date:	
National Coordinator Date:	

#### **Cost Categories and specifics**

## (the following are some examples of expenditures that can be funded through the Networking Initiative)

**Travel** - Ground or air transportation for salaried or contract staff, volunteers and resource people for activities related to the initiative. Includes meals and accommodation during travel time as per TB guidelines. (can be broken down by # of trips, # people travelling)

Salaries & Benefits - (incremental) or salaries and benefits for paid work directly related to the initiative.

**Honoraria/Professional Fees** - An honorarium is a payment to an individual to recognize a task performed and or knowledge contributed to the initiative. Professional fees are paid for the services of an individual who has expertise (researcher, evaluator, facilitator, etc.) relevant to and necessary for carrying out the initiative. Professional fees are usually paid through a contract.

Facilities - (Incremental) or includes cost of office rental and utilities related to the initiative. Also includes room rentals for meetings or conferences.

**Office Equipment** - Includes the cost of leasing operating office equipment like computers, printers, fax machines and photocopiers when they are necessary for carrying out the initiative. Also includes telephone and Internet costs related to the initiative.

Materials & Supplies - (incremental) Includes office supplies and other materials necessary to carry out the initiative. For example, postage, paper, photocopying or printing, resource materials, computer software, printer & fax cartridges, etc.

**Publicity & Promotion** - Includes the cost of producing and printing brochures, newsletters, purchasing ads, posters, etc., needed to promote the initiative.

**Other** - Expenses, related to the initiative, that do not fit any of the previous categories (ex. catering for meetings or conferences, audit, insurance, etc.). Items under this category must be identified and explained.