

1. GENERAL INFORMATION CONCERNING THE BODY

Legal name of the body (or legal person established in the public interest):		
Québec enterprise number (QEN) (if applicable):		
Address of head office (number, street):		
City:		Administrative region:
Postal code:	Telephone:	Fax:
E-mail address:		
Website:		
Name of representative designated by the body (or legal person established in the public interest):		
Title of designated representative:		
Address of designated representative (number, street):		
City:		Administrative region:
Postal code:	Telephone:	Fax:
E-mail address of designated representative:		

2. DESCRIPTION OF PROJECT

<i>Title of project:</i>
<p>Priority selected:</p> <p><input type="checkbox"/> 1) Develop and promote the use of prevention and dispute resolution methods.</p> <p><input type="checkbox"/> 2) Encourage access to legal services for clients with special access to justice issues.</p>
Amount of the financial assistance requested
<p>Description of project</p> <p><i>Describe the needs targeted by the project, specifying the problem, the individuals concerned, the particularities of the territory, the probable causes and the solutions proposed.</i></p> <p>The problems</p>

Concerned individuals

Particularities of the territory

Probable causes of the problems

Proposed solutions

Target clientele for the project

Geographical coverage of project

Determine the administrative region or regions concerned and circumscribe the geographical coverage of the project.

How is this project innovative?

3. OBJECTIVES OF PROJECT

Specify the objectives of the project.

Explain the connection between the objectives of the project and those of the financial assistance program, and with one on the priorities selected.

4. IMPACT OF PROJECT

Expected results over the short and medium term

Key measurable data provided to support the results (number of persons reached, number of session held, etc.)

5. ADMINISTRATIVE STRUCTURE OF PROJECT

Indicate the administrative structure for the project, including the number of paid and volunteer workers and their respective duties.

Number of paid workers:

Last and first name	Duty

Number of volunteer workers:

Last and first name	Duty

6. PROJECT PARTNERS (INCLUDE SUPPORTING LETTERS)

Name	Type of contribution (financial, human, technological, etc.)

7. FINANCIAL STRUCTURE

Have you requested or obtained other funding for this project?	Yes <input type="checkbox"/> No <input type="checkbox"/>
<i>Name of organization contacted</i>	
<i>Amount requested</i>	
<i>Amount obtained or granted</i>	
<i>Name of organization contacted</i>	
<i>Amount requested</i>	
<i>Amount obtained or granted</i>	

Do you have other funding for this project?	Yes <input type="checkbox"/>
	No <input type="checkbox"/>
Origin of the funding	
Type of funding	
Amount obtained or granted	

8. DOCUMENTS THAT MUST BE INCLUDED (MANDATORY)

- Schedule A (Action plan for the implementation of the project), duly completed.
- Schedule B (Budgetary forecast), duly completed.
- Schedule C (Overview of the applicant body), duly completed.
- A copy of the organizational structure of the organization
- A copy of the organizational structure of the project
- Certified copy of the resolution of the board of director authorizing the person responsible to file the application.
- Copy of the supporting letter or letters from project partners.

9. OTHER DOCUMENTS (OPTIONAL FOR LEGAL PERSONS ESTABLISHED IN THE PUBLIC INTEREST)

- Copy of the constituting act*.
- Copy of the body's general by-laws*.
- Copy of the financial statement for the last fiscal year, adopted at the last annual general meeting*.
- Copy of the last annual report, adopted at the last annual general meeting*.

10. SIGNATURE OF THE AUTHORIZED PERSON

I have read the information available on the *financial assistance program to promote access to justice* and the rules applicable. I accept and agree to comply with the program conditions.

I hereby certify that the information provided in support of this application is accurate and complete.

Last and first name	Title
Signature	Date

11. FILING OF APPLICATION

Complete the application form and Schedules A, B and C and mail them with the supporting documents to:

Bureau du Fonds Accès Justice
 Ministère de la Justice
 1200, route de l'Église, 3^e étage
 Québec (Québec) G1V 4M1

Attention: Mireille Pelchat, coordinator

The postmark or confirmation of delivery will indicate the date of receipt of the application.

No application will be accepted after the project submission deadline.