

**2013 Application Form**

Please use the following questions to help you complete your request for funding. Answer all of the questions in bullet (point form) using size 12 font. Keep the application to a maximum of 3 pages plus an attached budget. The space indicated below for each question is a guideline.

**Name of Project:**

**Lead Organization:**

**Mailing Address:**

**Contact Person:**

**Phone:**

**Fax:**

**Email:**

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**TOTAL AMOUNT OF REQUEST: \$**

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**1. Lead Organization:**

*Briefly tell us about the work your organization does with children and families. Describe your experience in providing programs to families on social assistance. Explain how your organization has the capacity to manage funds according to financially acceptable practices.*

**2. Project Objectives:**

*List the objectives of your project/program. What do you hope to achieve with your project?*

**3. Target population:**

*Describe the target population and geographic area to be served by your project/program. List any eligibility requirements for your target population.*

**4. Project/Program Description:**

*Describe what you plan to do. Please be specific.*

**5. Describe how your project meets the principles and objectives of NCB Reinvestment as outlined in the Funding Application Guidelines.**

*What is the rationale for your project? Explain how the project will help to prevent and/or reduce the impact of child poverty?*

## **6. Partners/Community Support**

*If relevant, list the partners that you will be working and describe their role in supporting the delivery of your program. What linkages will your project have with the community?*

## **7. Evaluation**

*What results do you expect to achieve through your project. (Be as specific and concrete as possible.) How will you measure these?*

## **8. Proposed Budget**

*Attach a budget for your project outlining expected expenses for salaries and benefits, program materials, promotion, travel, evaluation, etc.*

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***Completed applications must be received by 4 p.m. on  
Friday, April 12, 2013 by mail, fax or email.***

Mail: NCB Review Team  
c/o William Tigert, Director of Social Services  
City of Stratford – Social Services Department  
82 Erie St., Stratford, ON N5A 2M4  
Fax: 519-273-7191  
Email: [kbjorkquist@city.stratford.on.ca](mailto:kbjorkquist@city.stratford.on.ca) (Subject Line: NCB Funding Request)