## **EQUITY & DIVERSITY FUND APPLICATION FORM**

CHR Project #:	

(CHR to assign # if project is approved)

APPLICANT INFORMATION				
Contact Name:				
Contact Title:				
Student Group Name:				
Phone:	Email:			
Campus location (Building/ room #):	York Campus: ☐ Glendon ☐ Keele			
Tell us about your group:				
Her years group rescited founding from	the Coutre for Human Bights hefere?			
Has your group received funding from the Centre for Human Rights before?  Yes No If yes, and if possible, please tell us how much funding we gave you and when, and what you purchased with the funding.				
you and when, and what you paremase.	a with the fanding.			
PROJECT INFORMATION				
Project Name:				

Project Name:			

Project Date(s):		Project location:			
Project Description: (	Project Description: (500 words max, including how it will benefit the York Community)				
		,	,,		
How does this project	t support the CHR	's mandate? (If unsure, see the Ch	HR's <u>website</u> )		
If your project involves holding an event, who do you expect to attend and how many					
of them? Please check and indicate #:					
☐ Students:	#	☐ Faculty:	#		
☐ Staff:	#	☐ Wider York Community:	#		

Funding Amou	nt Requested: (Note: max \$500,	/project) \$		
What items wil	ll be purchased with the CHR's f	unding?		
Are you receivi	ing funding from any other orga If yes, please describe how me		d for:	
Are you partne	ring with another group on this	project? If yes, who?		
How will you p	romote this project?			
promotion  PAYMENT IN	Please Note: CHR and York U lonal materials. We will send these	• • • • • • • • • • • • • • • • • • • •	/ed.	
	l <b>ease Note:</b> If your application is o your group by cheque. You will	• • • •	r office.	
Please state th	e official name of the group to	whom the cheque should b	e addressed:	
SIGNATURE  By signing below, if funded, you agree to  submit a report on the project within two weeks of the project's completion.				
	The reporting form is located o	n the CHR's <u>website</u> .		
Contact / Applicant:				

Please submit your application via email to:

**Group name** 

Date

Regan Mancini, Programs, Outreach and HR Advisor,

rmancini@yorku.ca

Centre for Human Rights
York University, Keele campus

Signature

Technology Enhanced Learning Building, Room 2070 Tel: 416-736-5682 / TTY: 416-650-8023 / Fax: 416-650-8023