

**2023 General Application**

**Application Instructions**

The following application must be completed and submitted electronically with all supporting documents no later than 4:00pm EST on

**Friday September 9, 2022,** to trust@sndevcorp.ca. **Late or incomplete applications will not be accepted or reviewed by the Trustees**.

Before handing in your application please ensure you have read through the Application Guidelines & Instructions Handbook to ensure you have completed

the application form correctly and attached all documentation.

***Application Pre-screening Available***

***Submit or e-mail your completed application with all supporting documentation between July 29 – August 26, 2022, at 4pm to*** *Trust@sndevcorp.ca****.***

***Administration will review your application for completeness.***

 **SECTION I: GENERAL INFORMATION**

 See Guidelines Section 1, Page 8 & 9

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| --- | --- | --- |
| **1** | Organization Name |  |
| **2** | Are you a: Company (For Profit, Not for Profit, Charity), Organization, or Community Group? ***See definitions*** |  |
| **3** | Mailing Address, Blue Number Address, Phone, E-mail | Address:Phone number:E-mail: |
| **4** | Website (if Available) |  |
| **5** | Lead Applicant (Name of Person submitting application on behalf of the organization/department):  | Name:Phone Number:E-mail: |
| **6** | Contact Person(s) for application (if different): | Name:Phone number:E-mail:  |
| **7** | Organizational Mission  |  |
| **8** | What is the Population Served by your Organization(s)? |  |
| **9** | Organization Establishment Date |  |
| **10** | Business Number (if Available) |  |
| **11** | If the salary of a new employee forms part of this application, include your WSIB number and Payroll Number. |  |
| **12** | Have you applied previously to the Economic Development Trust (EDT)? Yes/No If yes, were you successful? Yes/NoWere there any concerns? Yes/No If yes, please explain what they were. |  |
| **13** | Organizational Chart of your Organization |  |
| **14** | Include all names and contact information of your Board or Executive members. |  |
| **15** | Timeline of Proposal (January – December 1, 2023) |  |

 **SECTION 2: EXECUTIVE SUMMARY**

See Guidelines Section 2, Page 9, 10 & 11

|  |  |  |
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| **1** | Proposal Title |  |
| **2** | What is the total cost of your proposal and what is the dollar value you are requesting from Economic Development Trust?   |  |
| **3** | Provide a summary of your proposal.  |  |
| **4** | Please estimate the number of Six Nations members that will benefit firsthand from your proposal. How did you arrive at this number?  |  |
| **5** | Demonstrate how your project aligns with the 2019 Community Plan. Identify one or more Community Priorities listed in the Community Plan Priorities and Goals. Refer to pages 12 & 13 of the Community Plan.  |  |
|  **(a)** | Identify one or more Community Goal(s) listed in the subsection of the priority you picked that your proposal addresses. |  |
| **(b)** | In 500 words or less please describe how your proposal will build capacity of Six Nations. Please feel free to reference the progress measurement criteria listed under the goal you identified in Subsection 5(a) above. Please also ensure you address some Key Challenges & Concerns related to your identified goal. |  |
| **6** | We encourage applicants to partner with other organizations and departments where appropriate. Is this a single application or partnership application? Identify any partnerships you may have that will enhance the proposal and benefit or reach the broader community. Please indicate if your partner is identified as one of the "suggested partners" in your goal category listed in 5 (a) above. |  |
| **7** | How will this proposal have a positive impact on the Six Nations Community, immediately and/or in the long-term? |  |
| **8** | Will your proposal have a negative impact on any of the Community Priorities and Goals in anyway? Yes\_\_\_\_ No \_\_\_\_\_Please explain your answer including how any negative impacts will be mitigated (if applicable). |  |
| **9** | Are there any community research, studies, surveys or questionnaires that demonstrate the need for your proposal? Provide a clear and concise summary (also provide links if available). (Maximum 200 words)  |  |
| **10** | Applicant must demonstrate there is no duplication of funding for any components of the proposal. Please identify guaranteed or potential funding as well as “in kind” contributions. |  |
| **11** | How will this proposal be maintained after the funding is complete?  |   |

 **SECTION 3: FINANCIALS**

 See Guidelines Section 3, Page 11

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| **1** | SNGRDC is committed to ensuring that our cultural and community values guide our pathway to Economic Development. SNGRDC's Guiding Principles are reflective of these values and create the foundation for all business decisions. ***Budgets - 1 quote must come from an Onkwehón:we/Indigenous vendor/business. If you cannot obtain a quote, please explain why.*** | **See Guidelines** |
| **2** | Employment of Six Nations members. | **See Guidelines** |

**SECTION 4: SUPPORTING DOCUMENTS**

 See Guidelines Section 4, Page 12

Provide all supporting documents with your application.

1. Board or Organization Approval/Resolution to complete the proposal or submit the application;
2. If the application is from a registered charity or Not for Profit Organization (NPO), provide Letters Patent or Articles of Incorporation (as the case may be);
3. Proof of land ownership or authority to utilize Six Nations land [Only required if your proposal is to build/access any parcel of land];
4. Most recent audit. For those who do not receive an annual audit provide a copy of your Unaudited Financials for the previous year **and** a copy of your organizational budget for the current year;

*Note: Organizational budgets are required to ensure that organizations are financially responsible and can properly manage any funds that are granted to them. The Trust is accountable to the community and need to be provided with this documentation to demonstrate financial organization principles.*

1. Proof of Insurance; and
2. Where applicable, Memorandum of Agreement between partnering organizations or departments signed by the relevant persons having authority for each organization/department included in this application. A letter of approval of financial support may be included for those supporting financially but not considered partners.

 **SECTION 5: SIGNATURE PAGE**

See Guidelines Section 5, Page 12

 By signing this application, the Signing Officers agree to the following:

* Six Nations of the Grand River Economic Development Trust may release information or knowledge of the project to any person, corporation, or

 agency and media requiring such information.

* If shortlisted, a member of the Organization may be asked to make a presentation.
* In the event that this project is cancelled prior to completion, the Organization will be responsible for all financial loss to the Trust.
* In the event that the Board/Organization is dissolved, we agree that any property (or items purchased) will be returned to the Trust.
* A contracted amortization schedule will be in place for any assets purchased under this contract and that property must be returned to the Trust if it

 is not in use according to the contract or being considered for dispossession during the amortization period.

* The Organization is prepared to hold all files and financials pertaining to this project for no less than seven years and will provide to the Trust or the

 Trust’s auditors upon request.

* The Board and/or Organizational Executive are aware of and approve the submission of this application.
* All information within this application is true and accurate.
* To receive future electronic communication from the Six Nations of the Grand River Economic Development Trust regarding any information/updates

on the EDT and Six Nations Community Plan.

* Mandatory attendance for all successful applicants to attend the Annual General Meeting of the Trust. You may also be asked to present your Project

 at the Annual General Meeting.

 Organization Name:

 At least two Organization Signing Officers are required for all contracting and invoice payments. Please identify the two members who will, if

 successful, legally bind the Organization for this application and contracts.

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|  | **Signing Officer 1** | **Signing Officer 2** |
| **Name** |  |  |
| **Signature** |  |  |
| **Title** |  |  |

|  |  |
| --- | --- |
|  | **Lead Applicant**(if different from above signing officers) |
| **Name** |  |
| **Signature** |  |
| **Title** |  |
| **Date** |  |

 *If you are unable to Scan and Upload this section*, you may provide the original signature page directly to the Trust Office located at the

 Six Nations Tourism Building.

Please ensure all necessary signatures are included by the application deadline.

 [ ]  **I understand the importance of avoiding any conflicts of interest (or the appearance thereof) when obtaining quotes for goods and/or services.**

[ ]  **Note: If successful the Recipient agrees that they will be available to attend and present the Project at the Annual General Meeting of the Trust.**