

Milton Community Fund Emerging Organization Application 2018



Choose the application best suited for your organization:

- If your organization has existed in the community for more than 3 years: Complete the “Organization” application package.
- If your organization has existed in the community for less than 3 years: Review this “Emerging Organization” application package to determine which application is best suited to your organization’s status.

Submit the sections that apply:

This application package is divided into several sections.

- **Part A:** Emerging Organization Applicant Information
- **Part B:** Funding Proposal
- **Part C:** Budget Information
- **Part D:** Organization Information
- **Part E:** Funding for Training Proposal (Complete and submit this section if applicable)
- **Part F:** Funding for Event Proposals (Complete and submit this section if applicable)

Notes:

- Emerging organizations are eligible for a maximum of 25% of their gross operating expenses.
- Two (2) executive members of your organization must sign the application.
- Please review the “Emerging Organization Application Checklist” to be sure you have included all information required.
- Please refer to the Budget Sample on the Town website for assistance with Part C
www.milton.ca/miltoncommunityfund
- The contact name noted in your application will be the person that Town staff communicate with to address questions and results regarding your application.

Timing:

Application Deadline	Funds Received	Funds must be spent from...
September 10, 2018, 4:30 pm	January 2019 *	January 2019 – January 2020

*Subject to change

Please submit your application to:

The Corporation of the Town of Milton; Community Services Department

Attention: Denise Black, Community Development Advisor

Drop off: Town Hall, 150 Mary Street

By mail: Town of Milton 150 Mary Street, Milton, ON L9T 6Z5

Community Services Department, **Mailing Address:** 150 Mary Street, Milton, ON, L9T 6Z5
For more information, contact Denise Black, **Phone:** 905-878-7252, ext. 2539, **Fax:** 905-864-3222
Email: denise.black@milton.ca

Information provided by the applicant and contained within the application form and any applicable attachments, is collected under the authority of the Municipal Act, 2001, Section 11, and will be used to evaluate and recommend funding allocations for the Town of Milton, Community Services Department programs. If you have questions about this collection, please contact the Community Development Advisor, 150 Mary Street, Milton, ON L9T 6Z5, 905-878-7252, ext. 2539.

Last Updated: April 13, 2018

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Application Checklist

Please review this checklist prior to submitting your application.

- Application form (attached) signed by two (2) members of your organization's executive; one copy must have original signatures. If applicable, an Executive Director can be one of the two signatures. **Your submission must include three (3) copies.**
- Written quote (estimate) from a supplier or contractor if your request is for equipment or facility upgrades; a minimum of three (3) quotes are required if your request exceeds \$4,999, only one copy required.
- Letter of permission from the facility owner if your request is for facility upgrades to a site you do not own, only one copy required.

Your application must be accompanied by one (1) copy of the following documents:

- Operating budget for your organization's operating year in which funds received would be utilized; your budget should include a line item to show your grant request to the Town of Milton (The amount shown in Part C and E of your application should match this line.)
- Membership list, including names, town/city of residence and telephone numbers or submit a written request for exemption
- List of executive officers/organizing committee, including names, town/city of residence, telephone numbers and years of service on the committee

OR

- List of Board of Directors (if applicable), including names, town/city of residence and telephone numbers, years of service on the Board and who is serving in Executive positions

Not-for-profit corporations must submit:

- Copy of letters patent
- Current certificate of status from the Ministry of Government Services. Companies Branch (issued when an organization updates letters patent/incorporation status)
- Copy of constitution and/or organizing by-laws

Organizations who are **not** incorporated must submit:

- Copy of constitution and/or organizing by-laws

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Part A –Applicant Information

Contact name: _____

Organization name: _____

Mailing address: _____ Apt/unit: _____

Town/city: _____ Postal code: _____

Website: _____ Phone: _____

Fax: _____ Email: _____

Total Funding Request Part C: \$ _____

Total Funding Request Part E: \$ _____

Total Funding Request Part F: \$ _____

Total Funding Request: \$ _____

This application is being submitted to the 2018 Milton Community Fund Program

I have reviewed the entire application submission and all information provided is true and accurate to the best of my knowledge and understanding. As a signing officer for the organization, I certify that there are at least five members on the board/executive/organizing committee with a minimum of four members not related by blood.

Two (2) members of the executive (signing officers) must sign organization applications.

Signature: _____ Print name: _____

Date (mm/dd/yy): _____

Signature: _____ Print name: _____

Date (mm/dd/yy): _____

Please note the following:

The contact name noted in your application will be the person that Town staff communicate with to address questions and results regarding your application.

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Part B - Funding Proposal

If you are applying for funding other than for training or events, please complete this section.

Please note the following:

If you are also applying for training funding complete Part E or event funding complete Part F.

B1. Describe what you are seeking funding for and how you would specifically use the grant.

B2. How will receiving this funding benefit your organization? (What changes/improvements will members / participants / volunteers experience?)

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B3. How will receiving this funding impact the Milton community in both the short term and the long term.

B4. How will you evaluate your project/activity and measure the success of your initiative? (Check all that apply.)

- | | |
|---|--|
| <input type="checkbox"/> Participant survey | <input type="checkbox"/> Analyze budget for expenditure decrease |
| <input type="checkbox"/> Reviews from local media | <input type="checkbox"/> Analyze budget for revenue increase |
| <input type="checkbox"/> Feedback from social media site | <input type="checkbox"/> Achieve increased functionality |
| <input type="checkbox"/> Track increase/decrease in membership | <input type="checkbox"/> Improved energy efficiency |
| <input type="checkbox"/> Track increase/decrease in participation | <input type="checkbox"/> Review increase/decrease of safety concerns |
| <input type="checkbox"/> Track increase/decrease in volunteerism | <input type="checkbox"/> Other (Please explain below): |

B5. What financial plans does your organization have to sustain the activities outlined in your proposal in the future?

B6. How will you be affected if the grant is not approved or if a reduced amount is granted?

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Part C – Funding Proposal Budget

Please note the following:

- Should full financial support not be recommended for your proposal, it will be helpful to know which items you view as the most critical part of your request. List your requests for funding in the chart below in order of priority
- If your request is for equipment or facility upgrades exceeding \$4,999, a written quote (estimate) from 3 suppliers or contractors is required. Attach one copy of the quotes (estimates) to your application.
- If your request for any one item exceeds \$499, a written quote (estimate) is required. Attach the quote (estimate) to your application.
- Provide dollar values with taxes included.
- If your request is for a facility upgrade to a site you do not own, include a letter permitting this work to be done (subject to grant approval) from the facility owner.
- Emerging organizations may request up to a maximum of 25% of their gross annual operating expenses.

C1. Please itemize and list in order of priority your request(s) for funds:

A – Milton Community Fund Request (In order of priority)	Dollar Value (Including tax as applicable)	Partial Funding an option (indicate if applicable)
*Specific Request Total		

* Please indicate total in Section A under "Total Funding Request Part C."

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C2. Please indicate items your organization will also be purchasing and/or in-kind contributions related to this proposal.

B – Organization’s Contributions and Anticipated Revenue Sources	Dollar Value (Including tax as applicable)
Planned Purchases	
Sub-Total:	
Requested Donations (in-kind)	
Sub-Total:	
Other Funds Received Towards Project	
Sub-Total:	
Organization’s Contributions Total:	

Please refer to the sample on the Town website: www.milton.ca/miltoncommunityfund

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Part D – Organization Information

The following questions will help those reviewing your application to better understand how you have started to operate. Your answers to these questions will also assist you in creating your constitution and by-laws.

D1. Describe your group's purpose and what you hope to achieve as an organization.

D2. What measures are you taking to ensure you are not duplicating activities or services which already exist in the community?

D3. When did your group begin meeting?

D4. How frequently do you meet?

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D5 (a). Who is eligible to join your group? How does one become a member?

D5 (b). Are there fees associated with membership/participation?

Yes; what are the rates based on?

No

D5 (c).) If applicable, describe any changes that you anticipate may occur in the future with regard to membership and fees.

D6. Please provide the date and location of your first Annual General Meeting.

D7 (a). Have you set up a bank account for your group?

Yes; who has signing authority for the account?

No

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D7 (b.) What happens/will happen to profits generated by your group?

D7 (c). How does/will your group handle operating shortfalls?

D7 (d). Can members receive funds from your group?

Yes; please describe what these funds would cover. (Examples: Board salaries, travel expenses, etc.)

No

D7 (e). What is the dollar value of your group's operating expense budget for the year in which funds received would be utilized?

(Note: A maximum of 25% of your gross operating expenses will be eligible for funding)

D8 (a). How many members does your group have at this time?

D8 (b). How many of your members are residents of Milton?

D8 (c). Programs offered by your organization are primarily serving which demographic and how many people?

Children (below the age of 13)

Youth (between the ages of 13 - 24)

Adults (between the ages of 25 – 54)

Senior Adults (55 years of age and older)

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D9. Does your organization host events for general public enjoyment in the Milton community?

Yes; please complete the chart below.

No

Event	Date	Location	Anticipated Attendance	Is Your Organization the Lead Organizer?
				<input type="checkbox"/> yes
				<input type="checkbox"/> yes
				<input type="checkbox"/> yes
				<input type="checkbox"/> yes
				<input type="checkbox"/> yes
				<input type="checkbox"/> yes
				<input type="checkbox"/> yes
				<input type="checkbox"/> yes

D10 (a). How many volunteers support your organization?

D10 (b). Approximately how many volunteer hours per year does this represent?

D10 (c). Does this number of volunteers fulfill your organization's needs?

Yes

No; approximately how many more volunteer hours per year are required to meet your needs?

D11. How does/will the Milton community benefit from your group's presence in our community?

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D12. How does your organization promote itself to the community?

- | | |
|--|---|
| <input type="checkbox"/> Newspaper advertising | <input type="checkbox"/> Social media |
| <input type="checkbox"/> Community Services Guide advertising | <input type="checkbox"/> Word of mouth |
| <input type="checkbox"/> Website | <input type="checkbox"/> Direct mailing to Milton residents |
| <input type="checkbox"/> Halton Information Providers Database | <input type="checkbox"/> Other: |
| <input type="checkbox"/> Posters on community information boards | <input type="text"/> |

D13. What are your fundraising activities and/or sponsorship plans for the upcoming year?

Activity, Event or Sponsor	Anticipated Net Income (dollars)

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Note: If you have not attached a constitution and/or by-laws, please complete the following questions.

D14. What is the make-up of your decision-making group?

(Examples: Executive comprised of the following positions...; Board including the following positions...)

D15. How do you select the individuals for the decision-making group?

D16. How long is the term for being a part of the decision-making group?

D17. What is/will be your process for selecting new members to serve in these positions in the future?

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D18 (a). How are decisions made regarding how you operate? (Examples: Do all members have a vote? Do members elect a group of members to work as an "Executive" or "Board of Directors" to serve the membership?)

D18 (b.) How many members need to be present for decisions to be accepted?

D19. What measures have you/will you put in place to:

(a) Communicate with the membership?

(b) Hold decision-makers accountable to the general membership?

(c) Make changes to your operating "rules?"

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Part E – Funding Proposal for Training (Complete this section only if applicable)

Please note the following:

- If your application is for more than one training activity, complete a separate form for each training activity.
- Attach a conference/training brochure noting the activities you plan to attend and the associated costs.
- A minimum of 75% of your membership/registrants must be comprised of Milton residents/ratepayers in order to qualify for trainings and certifications.
- Training clinics or certification programs for coaches and trainers must be considered a minimum certification requirement by the governing body (maximum \$200 per person).
- Training clinics or certification programs for officials (umpires, referees, etc.) must be considered an entry level certification requirement (maximum \$200 per person).
- Maximum allowance for conference attendance is \$1,000/person.

E1. What is the name of the course or certification you are seeking funding for?

E2. What Division or level of certification requires this training?

E3. What will participants learn by participating in this program?

E3 (a). Is this the minimum requirement for this Coaches or Trainers position in your sport?

- Yes
- No
- Not applicable

E3 (b). Is this the entry level certification for an Official in the related sport?

- Yes
- No
- Not applicable

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E4 (a). Describe how this training will benefit your organization. (Check all that apply.)

- | | |
|---|--|
| <input type="checkbox"/> Mandatory for all coaches | <input type="checkbox"/> Mandatory for all volunteers |
| <input type="checkbox"/> Mandatory for all officials | <input type="checkbox"/> Increases retention of volunteers |
| <input type="checkbox"/> Trains the Trainer | <input type="checkbox"/> Improves safety |
| <input type="checkbox"/> Linked to existing training (NCCP, Speak Out, High Five, etc.) | <input type="checkbox"/> Tailored to meet the needs of the organization |
| <input type="checkbox"/> Mandatory for all staff | <input type="checkbox"/> Increases knowledge/education |
| <input type="checkbox"/> Other (Please explain) below | <input type="checkbox"/> Expands contacts with other similar organizations |

E4 (b). How long do you anticipate the trainee(s) will contribute service to your organization?

- | | |
|--|--|
| <input type="radio"/> Less than one year | <input type="radio"/> One to two years |
| <input type="radio"/> Two to three years | <input type="radio"/> Three to four years |
| <input type="radio"/> Four to five years | <input type="radio"/> More than five years |

E5 (a). Please indicate who will be taking this training and their appropriate category or categories; provide additional

Category	Training to be Taken by...	Volunteer Position	Paid Position
Front Line (coach, leader, etc.)		<input type="checkbox"/>	<input type="checkbox"/>
Secondary (Board members)		<input type="checkbox"/>	<input type="checkbox"/>
Officials (referee, umpire, etc.)		<input type="checkbox"/>	<input type="checkbox"/>
Trainers (sport, vocal, etc.)		<input type="checkbox"/>	<input type="checkbox"/>
Other (specify below):		<input type="checkbox"/>	<input type="checkbox"/>

information to clearly define who will be trained.

E5 (b). If the individuals are being paid, please indicate their age category

- Under 18 years of age
- 18 years of age and older

E6 (a). Is this a repeat or re-certification training?

- Yes; expires:
- No

E6 (b). Is there more than one level to this training program?

- Yes; next level:
- No

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E7. Where will the training be held?

E8. Please indicate where this training priority fits in relation to items requested in Part C (as applicable).

- First Priority
 Second Priority
 Third Priority
 Lowest Priority

E9. Training Budget:

Description of Expenses	Anticipated Expense Amount	Milton Community Fund Request
# of people being trained: _____ Cost of course per person: _____		
Facility rental expenses:		
Training materials/resources:		
Other training expenses:		
Travel costs associated with training: Type of transportation: _____ Mileage for car travel: _____ km x \$0.17/km		
Accommodation: # of rooms: _____ # of nights: _____		
Total:		

*Total Funding Request: \$

Priority (if more than one training request):

*Please indicate this total in Section A under "Total Funding Request Part E"

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Part F – Funding Proposal for Events (Complete this section only if applicable)

Please note the following:

- If your application is for more than one event, complete a separate form for each event.

F1. What is the name of the event you are seeking funding for?

F2. What is the location and address of the event?

F3. What is the date and time of your event? Provide for each day if applicable.

Date	Time (Hours of operation)

F4. What is the estimated attendance for the event?

F5. Is this a first time event?

Yes

No; how many years have you been running this event?

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F6. Is there an entrance fee or any fees for participation?

Yes; provide fee structure:

Description of Fee	Fee

No

F7. Is this a private event or open to the public?

Private

Open to the Public

F8 (a). How have you promoted this event?

F8 (b). Who have you promoted this event to?

F9. Provide a description of all activities at the event.

F10. Please indicate where this event request priority fits in relation to items requested in Part C (as applicable).

First Priority

Second Priority

Third Priority

Lowest Priority

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F11. Event Budget:

Description of Expenses	Anticipated Expense Amount	Milton Community Fund Request
Total:		

*Total Event Funding Request: \$

Priority (if more than one event request):

*Please indicate this total in Section A under "Total Funding Request Part F."