



APPENDIX "B"
VILLAGE OF ASHCROFT
UNCONDITIONAL GRANT APPLICATION

Organization: _____

Mailing Address: _____

Phone: _____ Fax: _____ Email: _____

Briefly describe how the requested grant money will be used:

What amount of Grant funding is being requested? \$ _____

Total of anticipated expenses \$ _____

Did you receive a Grant last year? Yes ___ No ___

If yes, what was the amount of the grant? \$ _____

Forward completed applications to: Village of Ashcroft, Box 129, Ashcroft, BC V0K 1A0 or via email: to: ea@ashcroftbc.ca.

Applications for Unconditional Grants will be reviewed at the next scheduled Council meeting following the receipt of the request.



APPENDIX "C"
VILLAGE OF ASHCROFT
GRANT IN AID APPLICATION – ORGANIZATIONS

Organization Official Name: _____

Mailing Address: _____

Phone: _____ Fax: _____ Email: _____

Contact Person: _____ Title: _____

Briefly describe your organization's purpose:

Briefly describe how the requested grant money will be used:

What amount of Grant in Aid is being requested? \$ _____

Total organization operating budget for current year \$ _____

Total budget for project the grant is being applied for \$ _____

Did you receive a Grant in Aid last year? Yes ___ No ___

If yes, what was the amount of the grant? \$ _____

Attachments: Please provide the following to your application (if available):

- Financial Statement, Current Year Budget, Project Budget

Forward completed applications to: Village of Ashcroft, Box 129, Ashcroft, BC V0K 1A0 or via email: to: ea@ashcroftbc.ca.



Cheque sent to applicant if applicable

Date: _____

**APPENDIX "D"
VILLAGE OF ASHCROFT
GRANT IN AID REPORT FORM – ORGANIZATIONS**

Organization Official Name: _____

Mailing Address: _____

Phone: _____ Email: _____

Contact Person: _____ Title: _____

Grant Amount Received: \$ _____ Date of Grant Award: _____

How was the grant money used?

Provide a brief description of how the funds were allocated. Please list any specific activities, programs, or purchases made with the grant.

Total Expenditures:

Total anticipated expenses (as outlined in the application):

\$ [Amount]

Actual total expenditure:

\$ [Amount]

Did the actual expenses differ from the anticipated expenses?

Yes _____

No _____

If yes, please provide an explanation of the differences:

[Explain any variations]

What outcomes were achieved with the grant?

Please describe any outcomes, results, or impacts of the activities funded by the grant. Include any data or metrics to support the success of the funded project.

Challenges or obstacles faced:

Were there any challenges or issues faced during the execution of the funded project? How were they addressed?

Future Plans:

Do you plan to continue this project or activity in the future? If so, how will it be sustained?

Signature of Grant Recipient: _____

Date: _____

APPENDIX "E"
VILLAGE OF ASHCROFT
GRANT IN AID APPLICATION – INDIVIDUAL

Name: _____

Mailing Address: _____

Phone: _____ Fax: _____ Email: _____

Briefly describe how the requested grant money will be used:

What amount of Grant in Aid is being requested? \$ _____

Total of anticipated expenses \$ _____

Did you receive a Grant in Aid last year? Yes ___ No ___

If yes, what was the amount of the grant? \$ _____

Forward completed applications to: Village of Ashcroft, Box 129, Ashcroft, BC V0K 1A0 or via email: to: ea@ashcroftbc.ca.

Applications will be considered by Council twice per year at the first Committee of the Whole (COTW) meeting in March and September. Applications must be received by February 28/29th and August 31st to be considered.



**VILLAGE OF ASHCROFT
GRANT IN AID APPLICATION – INDIVIDUAL**

OFFICE USE ONLY

Date Application Received: _____

Application confirmed to be complete: Date: _____

Checklist: Completed application form: _____

 Financial Statement: _____

 Budget for current year: _____

 Project Budget: _____

Category: Arts & Culture: _____

 Sports & Recreation: _____

 Museum & Heritage: _____

 Social/Educational/Environmental/Other: _____

Amount of Grant in Aid Applied for: \$ _____ Approved: \$ _____

 Denied: _____

Comments:

Letter sent to applicant regarding decision Date: _____

Cheque sent to applicant if applicable Date: _____



APPENDIX "F"
VILLAGE OF ASHCROFT
GRANT IN AID REPORT FORM – INDIVIDUALS

Name: _____

Mailing Address: _____

Phone: _____ Email: _____

Grant Amount Received: \$ _____ Date of Grant Award: _____

How was the grant money used?

Provide a brief description of how the funds were allocated. Please list any specific activities, programs, or purchases made with the grant.

Total Expenditures:

Total anticipated expenses (as outlined in the application):

\$ [Amount]

Actual total expenditure:

\$ [Amount]

Did the actual expenses differ from the anticipated expenses?

Yes _____

No _____

If yes, please provide an explanation of the differences:

[Explain any variations]

What outcomes were achieved with the grant?

Please describe any outcomes, results, or impacts of the activities funded by the grant. Include any data or metrics to support the success of the funded project.

Challenges or obstacles faced:

Were there any challenges or issues faced during the execution of the funded project? How were they addressed?

Future Plans:

Do you plan to continue this project or activity in the future? If so, how will it be sustained?

Signature of Grant Recipient: _____

Date: _____