

Definition

“Lanark County Community Grants” is defined as taxpayer levied funds given to third party organizations that do not have a signed contract for service with Lanark County.

Purpose of Grant Program:

This purpose of the Lanark County Community Grants Program is to responsibly distribute County funds to support non-profit agencies and organizations who serve Lanark County.

Grants are awarded to local projects that have a direct impact on the people of our community or an indirect impact by increasing the capacity of organizations to initiate and sustain local projects. They will be evaluated on the basis of meeting the following objectives:

- Builds on existing community strengths and assets.
- Addresses service gaps.
- Responds to clearly identified local needs and provides demonstrated enrichment to the community.
- Uses resources efficiently and effectively.
- Involves meaningful partnerships.
- Strives for a significant and/or lasting impact.
- Benefits a wide audience.
- Shows innovation, creativity, and proactive thinking.
- Shows clear, measurable outcomes.
- Does not duplicate services.

This program will support those requests that address current unmet priorities identified within the community and that fall under 1 of the following 3 categories:

- Human Services
- Agriculture/Forestry
- Arts/Heritage/Tourism

Applications may be submitted for either a Project Grant or a Program Grant as defined in the table below:

	Definition	Term of Funding	Grant Available
1. Project Grants	<ul style="list-style-type: none"> ○ Short-term funding ○ Supports a specific project ○ Time limited (i.e., A project which has a beginning and an end, and can be completed in 12 months or less) ○ Seed funding to launch project 	Annual	Maximum of \$10,000
2. Program Grants	<ul style="list-style-type: none"> ○ Longer term funding ○ Requires ongoing funding to build sustainability 	Council Term	Maximum of \$50,000

Grants will not be issued:

- to cover deficits or retire debts; to replace current program funding;
- to provide endowment funds; for sectarian, religious, or political purposes;
- to contribute to buildings (renovation, construction or purchase);
- to individuals; to provide money for fundraising activities.

Eligibility:

Applicants must provide services or programs to residents of Lanark County. Unincorporated individual/organizations must work in partnership with an incorporated organization that will share in the project and receive and manage the funds.

Submission Date:

Grant applications will be due September 15th of each year. The review process would take place in September/October with notification following budget approval.

Review Process:

Grant applications are reviewed by the Lanark County Community Services Committee of the whole.

Funding Agreements and Liability Insurance

Applicants must submit the following with their proposal in order to be considered for funding:

1. Proof of incorporation for their group or sponsoring group.
2. Proof of comprehensive general liability insurance.

Every individual/organization receiving funding from the Lanark County Community Grants Program must provide proof of comprehensive general liability insurance, acceptable to the County of Lanark, and subject to limits of not less than \$2,000,000 inclusive per occurrence. This is to protect the organization in case of bodily injury, including personal injury, death, and damage to property. Copies of insurance **must** be submitted with the grant application.

Reporting:

When the project is finished, the grant recipient must provide the following:

1. A completed project report and evaluation.
2. A statement of expenditures (invoices upon request).

These must be submitted within 2 months following completion of the project. Future proposals will not be considered until the final project report is received and reviewed.

Indemnification

The grant recipient must agree to reimburse the Lanark County Community Grants Program if they fail to comply with the agreement.

Changes to the Project

Funding provided will be solely for the purpose stated in your agreement. Grant recipients will be required to advise us immediately - ***in writing*** - before making any changes to the project description or planned activities.

Appeal Process

Applicants accept that all grant applications may not be approved for funding and that there will be no opportunity for appeal.

Emergency Funding

These funding requests can be brought before committee or council at any time during the year. In order to qualify, applicants must be at risk of closure or losing a matching funding opportunity from another agency or level of government.

Lanark Transportation Association

The Lanark Transportation Association (LTA) is funded by Lanark County with a Community Grant. The LTA is exempt from this application process as their funding allows Lanark County to qualify for Provincial Gas Tax Funding. They are required to provide Lanark County with annual audited financial statements and Lanark County Council is represented on the board.

Please complete this application and attach it to your proposal.

Please mail to Lanark County, Clerk's Office, 99 Christie Lake Road, Perth, Ontario, K7H 3C6
or email to clerk@lanarkcounty.ca

Project Contact Person/Organization _____
Contact Person: _____
Title: _____
Address: _____
City or Town: _____ Postal Code: _____
Telephone: _____ Fax # : _____

Sponsoring Organization (if applicable)
Organization
Name of Organization: _____
Address: _____
City or Town: _____ Postal Code: _____
Telephone: _____ Fax # : _____

Funding Request

Are you applying for a i) Project Grant _____ Yes or _____ No
ii) Program Grant _____ Yes or _____ No

Under which category: i) Human Services _____
ii) Agriculture/Forestry _____
iii) Arts/Heritage/Tourism _____

Funding History

How long has your group been in existence? _____

Are you or your sponsoring body incorporated?

___yes ___no. If yes, ***please provide documentation with proposal.***

Other organizations

Have you applied for or received funding from any other source for this project?
___yes ___no

If yes, please attach letter of confirmation of approval and amount.

1. Name of Organization: _____
Contact Person: _____
Title: _____
Address: _____ Phone #: _____

2. Name of Organization: _____
Contact Person: _____
Title: _____
Address: _____ Phone #: _____

Project Budget

Using this format please be specific under expenditures (ie. salaries - what are the positions and level of pay; purchase of service - what does this apply to, etc.).

EXPENDITURES	AMOUNT	
Salaries & Benefits	\$	
Travel Expenses	\$	
Printing/Postage/Office Supplies	\$	
Rent/Utilities/Phone	\$	
Advertising	\$	
Program Supplies	\$	
Purchase Services	\$	
Equipment Lease	\$	
Other (Please specify)		
<u>Total Budget</u>	\$	
<u>Less</u> Total funding requested/received from other contributors for this project (list below)	Amount Requested	Amount Received
Name of Organization: <u>Contact Person:</u> <u>Phone #:</u>	-\$	-\$
<u>Total funding request from Enhancement Fund</u>	\$	

NOTE: The costs of your project must be kept separate from your group's everyday, ongoing expenses.

PROPOSAL FORMAT

Your proposal format **must** include the following information. Do not exceed 4 pages.

Background information:

1. Mandate or Mission Statement of individual/group.

(Describe general purpose of your group.)

2. Clients of the organization.

(Who are the clients of the organization? Do you target your programs and services to any particular group(s)? How are you going to target this group to participate?)

3. Your experience working in the project area.

(Give examples of successful projects you have participated/completed in the past.)

4. Geographic area served.

(Describe the geographic area served by your group.)

Project Description:

1. Project goals and objectives.

(Describe your project goals and its specific objectives.)

2. Outline the work plan and timelines of the project.

(Detail your work plan including the main activities. When will they start and how long will each one take?)

3. Who will be involved in this project?

(Identify specific target group. How many paid staff, volunteers? What will they be doing?)

4. Who will be reached by the project and who will benefit from the project?

(How many people will be served by your project?)

5. The partners to be involved in the project.

(Provide information about the roles/responsibilities/contributions of your partners in this project.)

6. Evaluation of your project.

(How will you know if you have been successful? What will you measure or assess to demonstrate this as related to Lanark County objectives? And how? Do you plan on sharing results with others? Relate results of your target group. ie. How many served? Did employment result?)

Liability Insurance

Proof of comprehensive general liability insurance of not less than \$2,000,000 per occurrence must be included with your application.

Incorporated Status

Proof of incorporation for your group or sponsoring group must be included with the application.

Authorization

I am authorized to sign this application on behalf of: _____
(Name of group applying)

Name: _____

Position: _____

Telephone: _____

Signature: _____

Date: _____

All required information must be submitted with proposals before consideration is given to projects.

Return Address:

County of Lanark
Attention: Clerk's Office
99 Christie Lake Road
Perth, ON K7H 3C6

INTERNAL USE ONLY Applicant Name: _____ Date: _____
 Application Complete: Yes No _____

Lanark County Community Grants Program

Evaluation Matrix	Total Points	Applicant Score
Builds on existing community strengths and assets	10	
Addresses Service Gaps	10	
Responds to clearly identified local needs and provides demonstrated enrichment of the community	10	
Uses resources efficiently and effectively	10	
Involves meaningful Partnership	10	
Strives for a significant and/or lasting impact	10	
Benefits a wide audience	10	
Shows innovation, creativity and proactive thinking	10	
Shows clear, measureable outcomes	10	
Does not duplicate services	10	
Total Points	100	

Amount Requested: _____ Amount Recommended: _____

Amount Approved by Council: _____