Eligibility Quiz

The Emergency Community Support Fund (ECSF) is being delivered by Community Foundations of Canada (CFC), United Way Centraide Canada (UWCC), and the Canadian Red Cross (CRC). Each funding partner, and their network, can support communities in various ways.

CFC's funding stream will only receive applications from **qualified donees**. Qualified donees are defined by the CRA and include the following:

- registered charities;
- registered Canadian amateur athletic associations;
- registered Canadian municipalities (sorted by province/territory);
- First Nations and other registered municipal or public bodies performing a function of government in Canada.

If your organization meets the eligibility questions below, you are encouraged to apply for the ECSF operated by CFC and the community foundation network:

Eligibility Questions	Yes/No
1. Is your organization a qualified donee (such as a registered charity, Canadian amateur athletic association, municipality, First Nation or other municipal or public body performing a function of government in Canada)?	
2. Did you secure funding from the Government of Canada, another ECSF intermediary (Canadian Red Cross, United Way Centraide Canada) or from a provincial, territorial and municipal government to cover the **same project costs**?	
3. Do you grant permission for this application and contact details to be shared with the Government of Canada, United Way, Community Foundations of Canada and the community foundation network, and Canadian Red Cross, for consideration and coordination of funding?	

Application Form

Our goal is to make this application process simple and easy to complete. Before you begin, we encourage you to read the **Applicant Guide** so that you clearly understand what is permitted. The Applicant Guide will also provide very concrete examples for your consideration.

If you are unable to apply for the Emergency Community Support Fund through the online application portal, you can download, complete and submit this paper-based application. This application form can also be used by participating community foundations to share with applicants who would like to review the questions beforehand. If you are submitting a paper application, please send it directly to your community foundation, or to covid19@communityfoundations.ca

This application form has five sections:

- Section 1: Where Your Application Will Be Reviewed
- Section 2: About Your Organization (Qualified Donee)
- Section 3: Project Information
- Section 4: Grant Request, Budget & Financial Information
- Section 5: Authorization & Declarations

In total, this application should take approximately 15 minutes to complete.

As you prepare your application, it is important to know that we are required to hold an open, impartial and fair selection and assessment process to fund projects which respect the following principles.

- Addressing a pressing social inclusion or well-being need caused by COVID-19;
- Serving one or more Vulnerable Populations; and
- Is not duplicating funds from another source to cover specific project expenses and budget lines for which the community organizations received funding.

The information you provide in this document will be used by local reviewers in their evaluation as they make funding decisions according to the criteria above.

Section 1: Location Where You Are Applying From

Your application will be routed to a local participating community foundation. Please let us know where your project will be taking place so we can direct your application in a timely and efficient manner.

1. **Please select the local community foundation or regional fund covering the region where your project will be delivered. Your application will be routed to the selected community foundation or regional fund for review.**
   Find a community foundation near you using the search tool available on our website
2. **Lead Applicant Contact Information**
   Who should we contact with any questions about your application?

Your Name	
Email Address	
Phone Number	
Preferred language for correspondence (French or English)	

Section 2: About Your Organization (Qualified Donee)

Question	Answer
3. Organization Name	
4. Street Address	
5. City / Town / Community	
6. Province / Territory	
7. Postal Code	
8. Charitable number or other qualified donee status. Find your organization's charitable number using CRA's list of registered charities and other qualified donees	
9. Please provide your organization's URL listing on the CRA website Example: Community Foundations of Canada	
10. Please describe the mission and main activities of your organization (max 200 words)	
11. Do you have a digital platform (website, Twitter, Facebook, Instagram, other)? If so, please include the links.	
12. Are you applying in collaboration with other community partners? (yes/no)	
13. If yes, please name the collaborating organizations and their roles with the project (max 200 words)	

Section 3: Project Information

Project Questions	Answers
14. Project Title (max 10 words)	
15. Summarize your project in one sentence.	
16. How does this project address an urgent community need caused by COVID-19? (250 words max). Your answer should cover all of the following: a) the project objectives and the activities to be funded; b) how the project fills a gap or meets an identified need; and c) how the project outcomes will benefit the community.	
17. Have you applied to either the Canadian Red Cross or United Way for funding to cover the same project costs? *Select all that apply*	❏ United Way ❏ Canadian Red Cross
18. This project primarily serves community members of the following vulnerable group(s) (select up to 3):	

Populations: By Children, Youth or Elderly

Primary	All That Apply	
❏	❏	Children and youth: All
❏	❏	Children and youth: Ageing out of care
❏	❏	Children and youth: Ages 0-18
❏	❏	Children and youth: Ages 19-29
❏	❏	Seniors and Elders - not in care
❏	❏	Seniors and Elders - living in care

Vulnerable Workers

❏	❏	Essential Workers

❏	❏	Temporary Foreign Workers
❏	❏	Workers in the informal labour market
❏	❏	Caregivers

Populations Requiring Specific Care or Supports

❏	❏	People experiencing homelessness
❏	❏	People experiencing low income or living in poverty
❏	❏	People living with mental illness
❏	❏	People struggling with addiction
❏	❏	Persons with disabilities
❏	❏	People experiencing domestic or gender-based violence
❏	❏	People living in group homes or supportive living (under the age of 55)
❏	❏	Prison populations (detained and incarcerated)
❏	❏	Veterans
❏	❏	Students (Postsecondary)

Projects Supporting Indigenous People

❏	❏	Indigenous: All
❏	❏	Indigenous: First Nations
❏	❏	Indigenous: Inuit
❏	❏	Indigenous: Métis

Racialized Communities

❏	❏	All
❏	❏	Arab
❏	❏	Black
❏	❏	Chinese
❏	❏	Filipino
❏	❏	Japanese
❏	❏	Korean
❏	❏	Latin American
❏	❏	South Asian
❏	❏	Southeast Asian
❏	❏	West Asian
❏	❏	Group(s) not otherwise specified (specify)

Gender & Diversity

❏	❏	Members of LGBTQ2S+ communities
❏	❏	Newcomers: All
❏	❏	Newcomers: Permanent Residents (immigrants and refugees)
❏	❏	Newcomers: Temporary Residents
❏	❏	Women and girls

Linguistic Minorities

❏	❏	Official Language Minority Communities (OLMCs)

Other

❏	❏	Other (specify)

19. Select all the types of services you will provide through your project:

	Services	Examples Include
❏	Food security	Prepared meals, delivery service
❏	Financial wellness	Financial literacy or coaching; access to income supports
❏	Home care or personal support services	For seniors and persons with disabilities
❏	Health and hygiene	Health information; access to medication; personal hygiene & medical supplies
❏	Information and navigation	Providing information; navigating community supports;
❏	Legal support	Tools and resources; legal clinic for community members, tenants etc.
❏	Mental health and wellness	Peer support; crisis support
❏	Shelter	Housing, rent support
❏	Personal safety	Information; access to violence and abuse support; violence and abuse prevention
❏	Social inclusion and learning	Friendly conversation; social activities; learning activities
❏	Transportation and mobility	Access to safe transport to essential appointments or errands
❏	Other (specify)	

20. Select all the types of activities intended to be provided in your project:

	Activities (Select All that Apply)
❏	Community outreach and engagement
❏	Delivering new models, tools, programming, services or resources
❏	Developing new models, tools, programming, services or resources
❏	Disseminating information and knowledge
❏	Volunteer engagement and recruitment
❏	Other (specify)

Location & Timing of Project

Question	Selection
21. What is the start date of your project activities?	**Date**
22. What is the end date of your project activities?	**Date**
23. In which area(s) is the project primarily taking place? (select all that apply) Urban areas (over 1,000 people) Rural & remote areas (under 1,000 people)	❏ Urban ❏ Rural & Remote
24. Is your project being delivered in the same location as where your organization is located? Example: A charity with a regional service area may be targeting a specific community they cover - not where the head office is located. In this case the organization would answer “No”.	
25. What City/Town/Community/First Nation will the project primarily take place?	
26. What Province /Territory will the project primarily take place?	

If there is any supplementary material you would like to upload for the reviewers, please do so here (PDF)

If there is any supplementary material you would like to upload for the reviewers, please do so here (Google Doc)

Section 4: Grant Request, Budget & Financial Information

27. Grant amount requested

Check with your community foundation to confirm the grant amounts available in your community.

Grant amount: $_____

28. Will your project continue if you are awarded a smaller grant?

○ Yes ○ No

Project Budget (optional)

Please ensure that your budget accounts for the full amount of the grant that you have requested.

- All budget items must be project-related and must be incurred during the grant period (April 1, 2020 - March 31, 2021).
- Eligible expenditures include: wages and benefits, professional fees, travel and accommodations, materials and supplies, printing and communication, equipment rental/lease/maintenance, administration costs, and disability support for staff.
- Ineligible expenditures include: purchase of real property (land or buildings).
- Specific costs and expenses covered by this grant cannot also be funded by other sources of funding.
- Note that funds received through this program can not be used to generate a profit or an income in excess of project expenses for the recipient organization.
- Download Template: Budget Template

Section 5 Authorization & Declarations

29. Does the recipient organization owe any amount to the Government of Canada? (yes/no)
30. Please disclose if there will be involvement of former public servants who are subject to the Post-employment Measures of the Values and Ethics Code for the Public Service, the Conflict of Interest and Post-Employment Code for Public Office Holders, the Conflict of Interest Act, the Parliament of Canada Act and the Lobbying Act. (yes/no)

Authorization: Recipient Community Organization

By completing this section, the applicant confirms that the Recipient Community Organization is a qualified donee and is supportive of this grant application.

❏ In checking this box, we declare our interest in submitting this application for consideration under the Emergency Community Support Fund. We confirm that the information provided in this application is accurate, and that it may be shared with Community Foundations of Canada and the community foundation network, United Way Centraide Canada, Canadian Red Cross and the Government of Canada.

❏ In checking this box, the applicant confirms that this project has not secured funds from another Emergency Community Support Fund provider (the Canadian Red Cross, United Way Centraide Canada), or another source of funding to cover the specific **costs and expenses of the activities described in this application.**

❏ In checking this box, you have appropriate signing authority to submit this proposal on behalf of the organization.

Upon submission, your application will be shared with your local community foundation for review. If your application is approved, electronic payment speeds up the disbursement process by approximately two weeks. If your organization is not set up to receive Electronic Fund Transfers (EFT), you may wish to set that up now. If you prefer, you can receive a cheque via mail.