

Kitimat Firefighters Ladder of Hope Grant Application Form



The **Kitimat Firefighters Ladder of Hope Charitable Fund**, in partnership with the **Kitimat Community Foundation**, is dedicated to supporting and strengthening our community. Our mission is to raise awareness and provide financial assistance to local charities and sports organizations, ensuring they have the resources needed to make a meaningful impact”.

Please read more details about Kitimat Firefighters Ladder of Hope Fund - Grant Application Guidelines before completing the Grant Application Form.

Grant Applicant Information

Organization Name:

Contact Person:

Position/Title

Phone Number:

Email Address:

Organization Address:

Website (if applicable):

Society number, Business number

(BN and/or a Charity Registration Number):

Type of Organization

☐ Charitable Group (any group with the purpose to support the community, education, religion and/or relief of poverty)

☐ Youth Development Non-Profit Group

☐ Other Non-Profit Group (Please specify):

Grant Proposal Information

Amount Requested:

Project Description

Provide a detailed description of the project or initiative you are seeking funding for. Where will the funds be used? Include goals, target audience, and any other relevant details.

What date will the funds be expected to be used by?

Justification and Impact

Why is this project important? Explain the need for this project within the community or organization and how it aligns with your mission or the mission of Kitimat Firefighters Ladder of Hope Fund.

How will the project benefit the community or target population? Please describe the expected outcomes and long-term impact of the project.

How will the success of the project be measured? Explain the evaluation process to determine the effectiveness and success of the project.



Organizational Capacity

Briefly describe the history and mission of your organization. (Include any significant achievements, community engagement, and experience in managing similar projects.)

Does your organization have experience in managing grants or similar funding projects?

☐ Yes ☐ No

If yes, please provide details of past projects and outcomes.

Additional Information

Are there any additional details you would like to provide? (Any further explanation or information that would help the reviewers in considering your application. If asking for an exemption of any of the requirements, please provide reasoning below.)

Agreement and Signature

By signing this application, I certify that the information provided is accurate to the best of my knowledge. I understand that submitting this application does not guarantee funding and that the Kitimat Community Foundation may request additional information or clarification before making a final decision. KCF is responsible for the final approval of fund distribution in accordance with CRA requirements, the funds' objective, and the foundation's policies.

Please note that if your group is approved for funding, you must adhere to CRA standards and provide documentation of how the funds were used (expenditure report, receipt, statement, invoice) within one calendar year of receiving the funds.

Signature of Applicant:

Date:

Please submit your completed application to:

charity@kitimatfirefighters.org AND info@kitimatcommunityfoundation.ca