

COMMUNITY SAFETY GRANTS APPLICATION

NAME OF ORGANIZATION		AMOUNT REQUESTED
MAILING ADDRESS		
	POSTAL CODE	ELECTORAL AREA
CONTACT PERSON	TELEPHONE NUMBER	FAX NUMBER

ATTACH A LIST SHOWING YOUR ORGANIZATION'S STRUCTURE (INCLUDING DIRECTORS AND VOLUNTEERS)
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IS YOUR ORGANIZATION <u>REGISTERED</u> AS A NON-PROFIT SOCIETY IN BC?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
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IF YOUR ORGANIZATION IS NOT A REGISTERED NOT-FOR-PROFIT SOCIETY, PLEASE EXPLAIN YOUR ORGANIZATIONAL STRUCTURE – ie. how do you operate as a group

WHAT WILL THIS GRANT BE USED FOR?

PLEASE LIST ALL GRANTS RECEIVED AND/OR APPLIED FOR FROM OTHER GOVERNMENTS OR SERVICE ORGANIZATIONS
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PLEASE PROVIDE DETAILS OF OTHER FUNDRAISING ACTIVITIES THAT YOUR ORGANIZATION UTILIZES
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WHAT SPECIFIC EXPENDITURES WILL YOUR ORGANIZATION NOT BE ABLE TO MAKE IF YOUR GRANT IS LESS THAN THE AMOUNT REQUESTED

DESCRIBE THE USE OF ANY GRANT RECEIVED LAST YEAR

Please ensure that you have answered all questions in full and that you include the following information with this application:

- A list of current members and their positions in your organization.
- A copy of your bank statement showing your organization's name and address.
- A copy of your organization's latest financial statement.
- A copy of your organization's current budget.

SIGNATURE

DATE

Please submit your organization's completed application to:

Finance Department
Regional District of Nanaimo
6300 Hammond Bay Road, Nanaimo, BC V9T 6N2
Telephone: 390-4111 or toll free 1-877-607-4111, Fax:
390-4163 Email: inquiries@rdn.bc.ca

OFFICE USE ONLY	20__	20__	20__	20__	20__
Previous year(s) grant					
Comments:					