

## THE CORPORATION OF THE TOWNSHIP OF NORWICH 2025 Community Grant Application Form

Please give as much information below so your application can be properly assessed.

In the event that more space is required in replying to a question, please use additional paper and attach to the application.

## A. Organization Name and Mailing address: (include full municipal address)

Contact Name:		Position:
Telephone: (519)	Email:	
B. Amount of Grant Being Requested \$	;	
C. Durnage of Creatu		
C. Purpose of Grant:		

D. If requesting an operating grant, what is the Township's contribution as a percentage of your total operating budget:

	<u>\$</u>	<u>%</u>
Operating Budget (less grant being requested)	\$	
Township's Contribution (grant being requested)	\$	
Total Operating Budget	\$	100%



1. Provide a brief history of your organization.

2. What are the general objectives and/or services of your organization?

3. Is there a local organization that provides similar services to those stated above? If yes, how are your services different from this other organization?

- 4. Do volunteers participate in your program?Yes No If yes, please tell us the number and type of involvement.
- 5. Is your organization local in nature, or is it a branch or segment of a provincial or national organization?

6. What are the ramifications of the Township denying a grant to your organization?



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7. What are your estimated grant requests from the Township of Norwich for the next 3 years?

2026: \$\_\_\_\_\_ 2027: \$\_\_\_\_\_ 2028: \$\_\_\_\_\_

To grant assistance in any one year, or over several years, is not to be interpreted as a commitment to future funding.

8. List the Executive Officers of your organization:

Name	Title	Contact Phone #

9. Please submit the most recent set of financial statements for your organization with your application.

Note: I understand by signing this application that the Township of Norwich makes no commitment to the payment of any grant prior to final Township Council approval. I also agree to submit a report within the grant calendar year outlining the success of the organization and the allocation of grant money.

Name / Title

Signature

Telephone Number

Thank you for completing this application form. If there is additional information, which you would like to include with this application, please do so.