Application Form

To submit a proposal, please complete and submit this form to antiracismtable@gov.pe.ca. For any questions, please contact the Anti-Racism Table using the email address above or call (902) 218-7853.

Accessibility: Please contact the Anti-Racism Table using the email address above or call (902) 218-7853 if you require accessibility accommodations to complete or submit this application. Accommodations may include but are not limited to the provision of a computer, printer, or internet access; or the assistance of a reader or a scribe.

The proposal will be reviewed by an evaluation committee and scored according to the attached evaluation matrix.

Upon completion, successful applicants will be required to submit a project report. A template for the project report will be provided as the indicated completion date for each applicant approaches.

PROJECT IDENTIFICATION	TION
Organization Name and Contact information (ad- dress, postal code, email address and phone number, type of institution, refer to the eligible list above):	
Project Lead (The Project Lead is the main contact from the Applicant Orga- nization who will lead the project):	
Proposed Project Name:	
Total cost:	
Date of expected completion:	
Date submitted:	

1. Project Description Describe the project. What problem are you aiming to address? What goals do you wish to achieve through this project?
*Max 750 words

2. Outline the Work Include specific budget, milestones and timelines that are relevant to your project *Note the attached Excel spreadsheet template if needed.	t.
*Max 500 words	

3. Project Impacts Who will your project impact? Describe the intended demographic(s) and approximate number of people. How will your project impact these people?
*Max 250 words

4. Project Outcomes Think about the potential outcomes. How will you measure the success of your project? Be specific about how you will collect and evaluate the information you gather, which should include, both, quantitative (e.g., success measured through numbers) and qualitative (e.g., success measured through participant satisfaction) indicators.
*Max 250 words

5. Ability of Applicant to Execute the Project Provide a description of your organization's mandate or past work experience in the project topic area. If this information is available online, include a link to your organization's website. The description is intended to demonstrate that your organization or project team has the necessary resources and experience to complete the project as proposed.
*Max 500 words

6.	Are you aware of any other supports (programs, projects, etc.) that exist in your area that are already working toward the same goal? If yes, please describe how your project is different from, or builds upon, what already exists.

7. Will you be applying to secure any additional funding from other sources for this project? If yes, please provide details on the funder and the percentage, including any in-kind or potential in-kind support.

MUNICIPAL APPLICANTS MAY BE REQUESTED TO SUBMIT A COUNCIL RESOLUTION.
I hereby declare that all information contained in and/or attached to this application is true and accurate to the best of my knowledge.
Please provide your signature and date below. Whomever is filling out the application can sign below.
Signature:
Date: