Gender Equity Diversity Inclusion & Community Enhancement Program

To be considered for funding, please complete and submit this form by **September 27, 2024** to GEDI@gov.pe.ca. For any questions, please contact the Program Coordinator via email or call 902-213-2995.

Accessibility: Please speak with the Program Coordinator if you require accessibility accommodations to overcome barriers related to filling out or submitting this application such as lack of computer, printer, or internet access; the assistance of a reader or a scribe to complete your application; or for other types of supports upon request.

1. Project Identification

Organization Name if applicable	
Project Lead The main contact/principal applicant	
Contact Information Email address & phone number	
Proposed project name	
Which stream do you intend to apply through? (See guidelines)	
Project start date (approx.)	
Project completion date (approx.)	
Funding Amount Requested ($)	
Date Submitted	

	Yes	No	I don't know
Have you **applied to** the GEDI Program in the past?			
Have you **received funding from** the GEDI Program?			

Note: Previously receiving funding through the GEDI program will not disqualify you from receiving future funding. This question was added for internal evaluation purposes and will help us better understand the clients we serve and emerging trends.

2. Project Description

Describe the project. What problem are you aiming to address? What goals do you wish to achieve through this project? Does your organization have the necessary resources and expertise to deliver this project?

3. Outline the Work
Include specific milestones and timelines that are relevant to your project.

4. Project Impacts and Outcomes
Who will your project impact? Describe the intended demographic(s) and approximate number of people. How will your project impact these people? Think about the potential outcomes.

5. Are you aware of any existing programs or projects already working toward this goal?
If yes, or if you've delivered this project before, how do you plan to build upon past successes?

6. 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 feedback) indicators.

7. Proposed Budget

Please outline the project expenses and estimated cost for the <u>entire</u> project, below. Be sure to include in-kind supports, here, as well.

Project Expenses	Estimated Cost ($)
	$
	$
	$
	$
	$
	$
	$
	$
	$
	$
	$
	$
	$
Total	$

8. What percentage of the project do you wish to have funded by the GEDI Program?
Please also use this space to indicate which of the above project expenses you would <u>not</u> like to be considered for funding, if there are any.

9. 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 supports.

Signature: _____

Principal Applicant

Signature: _____

Signing Authority of the Organization

Date: _____

10. Demographic Questionnaire for Organizations						
What type of organization are you representing?	Not-for-profit	Indigenous organization	Municipality	Registered charity	Educational institution	Individual (If so, no need to continue section)
How long has your organization been operating?	Less than 1 year	1 – 4 years	5 – 10 years	11+ years	Prefer not to say	
What size best describes your organization?	Micro (less than 10 employees/ volunteers)	Small (10-49)	Medium (50-249)	Large (250+)	Prefer not to say	
Where is your organization located?	Name your city, town, or municipality (or multiple)				Prefer not to say	
Does your organization aim to serve a specific clientele?	Yes (specify)				No	Prefer not to say

Do you plan to partner with another organization to fulfill this work? If so, please use the template we've provided to indicate who you will be working with and ensure they are aware of, and agree to, the work related to this project

Score	Evaluation criteria
25	**1.** Project Information: • Clarity and completeness of the project description • Alignment with the program's goals and objectives • Realistic timeline and deliverables • Appropriateness of the project scope and scale
25	**2.** Project Impacts and Outcomes: • Clarity and relevance of the project's intended outcomes and impacts • Potential to address gender, equity, diversity, and inclusion issues • Creativity in the proposed approach
10	**3.** Measuring the Success of the Project: • Clearly defined indicators and metrics to measure project success • Feasibility of data collection methods and evaluation strategies • Use of inclusive and participatory evaluation approaches
20	**4.** Capacity to Deliver: • Demonstrated experience and expertise of the applicant organization or individual. • Availability of necessary resources (e.g., staff, volunteers, facilities) • Collaboration with relevant stakeholders or community partners
15	**5.** Budget: • Completeness and accuracy of the budget proposal • Alignment of budget items with project activities and objectives • Realistic cost estimates and justification of expenses • Demonstrated financial sustainability or plans for securing additional funding
05	**6.** Continued Growth: • Introduction of new ideas or approaches that have not previously been proposed • Clear articulation of how the new project builds on previous (if applicable), showcasing lessons learned and improvements