

Community Safety and Well-being (CSWB) Collaboration Grant Application Form Example

Edmonton

Description and FOIP Statement

Grant Description - Collaboration

This Application is for the Community Safety and Well-being (CSWB) - **Collaboration Grant**.

The grant aims to enhance existing or establish new collaboratives or partnerships to advance CSWB Strategy goals and outcomes and strengthen the capacity of organizations to work together to improve safety and well-being in Edmonton.

A PRACTICE form is available on the website.

Before applying please take the time to review the Collaboration Grant Program Guide to confirm your organization and project/program is eligible.

The following Required Documents must be uploaded to the Application Form before you submit. Failing to provide these will result in your application being denied:

- Completed Project/Program Budget Form ([Budget Template](#))
- Most recent audited year-end financial statements, signed by 2 Board members **OR**
- Most recent internally generated financial statements (those that are not presented either as a notice to reader, a review or an audit) signed by 2 Board members and must include a bank reconciliation and bank statement as at the fiscal year-end

Application Deadline: Wednesday, February 21, 2024 by 11:59 pm.

Freedom of Information and Protection of Privacy (FOIP) Statement

Personal information is being collected under the authority of section 33(c) of the Freedom of Information and Protection of Privacy (FOIP) Act and will be used by the City of Edmonton, Community Grants Office to determine eligibility for this grant and for the management and administration of this program. The information in this application may be shared with other internal City of Edmonton business areas for reporting analysis. If you have any questions about the collection or use of your personal or organizational information, please email grants@edmonton.ca.

Applicant/Organization Information

Applicant Information

Name of Organization/Group (Legal name if applicable)

Organization Mailing Address (including postal code)

Organization Email

Organization Contact number

Main Contact Name
Main Contact Role
Main Contact Email (if different from Organization email)

Organization governance

<p align="center">Do you require a fiscal agent? *</p> <p>The fiscal agent agrees to accept and oversee grant funds on behalf of the grant recipient and is responsible for the financial accountability and reporting requirements. (If you are not incorporated for at least one year you will need a Fiscal Agent)</p> <p> <input type="checkbox"/> Yes I have a Fiscal Agent and will provide you the information below. <input type="checkbox"/> No, we are incorporated and our information is below. </p>	
If no:	If yes:
Under which Government Act is your Organization incorporated? Alberta Society Non-profit Private Company Non-profit Public Company Extra-Provincial Non-Profit Corporation Other:	Fiscal Agent - Legal Name of Organization
Organization Date of Incorporation (you must be incorporated for at least one year to be eligible for this grant)	Fiscal Agent - Organization Mailing Address (including postal code)
What is the mandate / mission statement of your organization?	Fiscal Agent - Organization Email
If you are awarded a grant your Organization may be required to sign a funding letter or funding agreement. Provide the name and email address for two people from your Organization that have the Authority to sign. Name: Email: Name: Email:	Fiscal Agent - Organization Contact number
	Fiscal Agent - Main Contact Name
	Fiscal Agent - Main Contact Role
	Fiscal Agent - Main Contact Email (if different from organization email)
	Under which Government Act is the Fiscal Agent incorporated? Alberta Society Non-profit Private Company Non-profit Public Company Extra-Provincial Non-Profit Corporation Other

	Fiscal Agent - Organization Date of Incorporation (must be incorporated for at least one year to be a Fiscal Agent for this grant)
	What is the mandate / mission statement of the Fiscal Agent?
	<p>If you are awarded a grant your Fiscal Agent may be required to sign a funding letter or funding agreement. Provide the name and email address for two people from your Organization that have the Authority to sign.</p> <p>Name: Email:</p> <p>Name: Email:</p>

CSWB Pillars and Principles

Collaboration Grant
<p>Select the primary pillar that your project will address:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Anti-racism <input type="checkbox"/> Reconciliation <input type="checkbox"/> Safe and inclusive spaces <input type="checkbox"/> Equitable policies, procedures, standards and guidelines <input type="checkbox"/> Pathways in and out of poverty <input type="checkbox"/> Crime prevention and crisis intervention <input type="checkbox"/> Well-being
<p>How will the program contribute to the Community Safety and Well-being (CSWB) pillar you selected?</p>
<p>Select the CSWB principle(s) that you apply to your project/program:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Community-led: The project/program is led by community organizations. It may involve collaboration between partners to ensure integration across systems. <input type="checkbox"/> Data-informed: The project/program is informed by research, analysis, knowledge and insights from Indigenous, Eastern, Western, and Interdisciplinary perspectives. Measurement and learnings will inform how to adapt and evolve the work. <input type="checkbox"/> Equity-based: The project/program will incorporate a GBA+ approach to remove systemic barriers. <input type="checkbox"/> Person-centered: The project/program will create a sense of connection that will empower and uplift individuals. <input type="checkbox"/> Trauma-informed: The project/program will create changes in alignment with the TRC, anti-racism and trauma-informed work to strengthen resilience among Edmontonians and their families.
<p>Explain how your project/program embraces the CSWB principle(s) you selected above.</p>

Project/Program Overview

Collaboration Grant	
Name of the project/program	
<p>Please select the Grant Priority that best describes your project:</p> <ul style="list-style-type: none"> • Collaboration/Partnership - Two or more organizations that are currently working together or planning to work together in a way that is focused and mutually beneficial towards a common goal. Partnerships are more formal in nature with an agreement in place that recognizes shared outcomes, investment of resources, risk, accountability and decision-making. A formal partnership is not a requirement to be eligible for this grant. • Research and Planning - An organization(s) undertaking planning, research or policy development to enhance data-sharing, communication, knowledge transfer, and other sector-related gaps. 	
Collaboration/Partnership	Research and Planning
Please provide a brief description of the collaboration (who is involved, what is the role of the partners, are there any agreements/MOUs/Terms of Reference in place or are you planning on developing these, is the collaboration new or existing?)	
Is the collaborative undertaking a new project/program or a new phase of an existing project/program?	Is this a new project/program or a new phase of an existing project/program?
Describe the work the collaboration is undertaking (the project).	Provide a description of the project/program.
	If your project or program is developing any tools or resources, please provide those details.
How did you determine the need for this project/program? (Identify trends, issues, and gaps in programs or services in the sector).	How did you determine the need for this project/program? (Identify trends, issues, and gaps in the sector).
How will the project/program benefit the sector or the community?	How will the project/program benefit the sector or the community?
	Project/program start date
	Project/program end date
Describe your collaborative and project/program evaluation plan (tools you will use, who will be involved, process, what you will do with the results, etc.).	Describe your project/program evaluation plan (tools you will use, who will be involved, process, what you will do with the results, etc.).

Attachments

Attachments Required	
○	Completed Project/Program Budget Form (Budget Template)
○	Most recent audited year-end financial statements, signed by 2 Board members OR
○	Most recent internally generated financial statements (those that are not presented either as a notice to reader, a review or an audit) signed by 2 Board members and must include a bank reconciliation and bank statement as at the fiscal year-end

Declaration

Declaration	The applicant declares, to the best of their knowledge and belief, the information provided is truthful and accurate, and that the application is made on behalf of the application-named organization.
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