**Anti-racism Grants Program**

**Practice form**

| **PLEASE NOTE:** *This is the PRACTICE form for the Project Ready Matching Grant, the Local Anti-racism Capacity Building /Innovation Grant and Local Community Participatory Action Research Grant. This form contains the same questions as the application form. We recommend that you review the questions in this PRACTICE form first, prepare your answers and then copy and paste your prepared answers into the actual online application form.* |
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**IMPORTANT INFORMATION**

Applications will be accepted up to midnight on the deadline.

Incomplete applications will not be accepted and will be removed from consideration.

**Before applying:**

* **Read the** [**Program Guidelines**](https://docs.google.com/document/d/1-XXeZr6bsK9KK8pz9IEwK3k1psAh2YgtWSNWqTouck0/edit?usp=sharing) **carefully**

**Contact:**  [grants@edmonton.ca](mailto:arac@edmonton.ca)

**Please keep a copy of this application for your records.**

**Additional resources and information:**[City of Edmonton Grants and Funding](http://www.edmonton.ca/programs_services/funding-grants.aspx)

[Anti-racism Advisory Committee](https://www.edmonton.ca/city_government/city_organization/anti-racism-advisory-committee.aspx)

| **Application Checklist –** Review carefully and ensure all boxes are checked | | | | | | | | |
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| **Refer to the** [Program Guidelines](https://docs.google.com/document/d/1-XXeZr6bsK9KK8pz9IEwK3k1psAh2YgtWSNWqTouck0/edit?usp=sharing) **for criteria and eligibility**  To make sure your application is processed as quickly as possible, please verify the following **before you submit:**  ☐Your organization is in good standing under the incorporation body. For those registered through Alberta Corporate Registries, if you are unsure, contact them at (toll-free by first dialing 310-0000) 780-427-7013.  ☐ All accounting and reporting requirements for any previous City of Edmonton funding has been completed. Organizations will not be considered for new funding until any outstanding accounting and reporting requirements have been satisfied.  ☐All sections of the application have been completed, including:   * **Budget:**   + The amount of funding you are requesting.   + The cash contribution clearly outlined, and whether amounts are confirmed or pending. Pending funds must be supported with documentation (e.g. where the funds are coming from, date of expected notification, alternate plan if the funds are not received, etc.)   + Details on the donated labour including a description of the work being done, how many people, for how many hours, and how it relates to the project. Rates are $20/hour unskilled and $40/hour skilled.   + The project expenses, including donated labour.   + Ineligible expenses can not be included in your budget.   ☐ Most recent 1) financial statement approved at your, 2) annual general meeting minutes, 3) bank statement, 4) proof of filing (annual return), 5) bylaws (if applying to the City of Edmonton for the first time) and 6) Certificate of incorporation (if applying to the City of Edmonton for the first time).  ☐ **Letters:**   * If applicable, letters of support from donors – showing fair market value for donated materials or professional services they are contributing to the project. * If applicable, letters of support from project partners you are collaborating with, which includes their relationship with your organization and their role in the project. * Letters of support from the community. These are *not required*; however, they demonstrate community support and need for the project.   *FREEDOM OF INFORMATION AND PROTECTION OF PRIVACY (FOIP) STATEMENT*  *Information collected on this form 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 in the administration of the Anti-racism Grants program. All information collected and used is protected by the FOIP Act. If you have any questions about the collection, use or disclosure of your personal information, please contact the Grants Office at 780-496-4933, grants@edmonton.ca or 18th Floor Edmonton Tower, 10111-104 Ave, P.O. Box 2359, Edmonton, Alberta T5J 2R7.* | | | | | | | | |
| **Identification of Funding Stream:** | | | | | | | |
| What funding stream does your project fall under (choose **only one**):  **☐ Project Ready Matching Funds:** To be used by community not-for-profits and local grassroots organizations to match funding with other anti-racism initiatives that have received approved funding and require some matching contribution.  **☐ Local Anti-racism Capacity Building/ Innovation:** Focused on local grassroots organizations working on anti-racism activities and actions that address barriers to participation, promote healing and/or reconciliation, illuminate and combat systemic and structural racism, and support sustaining developmental change (e.g. projects to build relationships with other communities also impacted by racism, projects that uplift the stories of people impacted by racism, community needs assessments and responses).  **☐ Local Community Participatory Action Research:** To be used by communities impacted by racism to support community-led research activities which address local issues and concerns specific to their communities. | | | | | | | |
| **Section A – Organization Information\*** | | | | | | | |
| \* If your organization is using a fiscal agent, your fiscal agent should complete Section A: Question 1, 2 and 3, and the organization that will be carrying out the project should complete Section A: Question 4 and Sections B, C, D and E of this application. The fiscal agent must be an eligible organization, as defined in section 3.1 of the Anti-racism Grants Program: Program Guidelines, and in good standing with the City of Edmonton. 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 detailed in section 10 of the Anti-racism Grants Program: Program Guidelines. If you are not using a fiscal agent and are applying on behalf of your own organization, which will be carrying out the project, complete Sections A, B, C, D and E in their entirety.   1. Incorporated (Legal) Name of Organization (*must match incorporation name*): | | | | | | | |
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| 1. Organization’s Mailing Address (must be in Edmonton)**:** | | | | | | | |
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| 1. **Legal Authorized Signing Authority Contact *(must be an Alberta representative’s contact details)*** | | | | | | | |
| Name: | | | | Position/ Title: | | | |
| Phone: | |  | | Email: | | | |
| 1. **Primary Application Contact *(must be an Alberta representative’s contact details)*** | | | | | | | |
| Name: | | | | Name of Organization (if different from Section A, Question 1):  Position/ Title: | | | |
| Phone: | |  | | Email: | | | |

| **Section B – Organization Overview** | | | | | |
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| **Provide a brief summary of the mandate (purpose, vision, and mission) and membership of your Organization:** | | | | | |
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| **Is your organization BIPOC-led?** ☐ Yes ☐ No **If yes, please elaborate:**  **What is your organization’s previous experience with any type of anti-racism initiative?** | | | | | |
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| **What is your organization’s annual operating budget?**   | **☐** | Up to $25,000 | **☐** | $100,000 - $249,000 | | --- | --- | --- | --- | | **☐** | $25,000 - $50,000 | **☐** | $249,000 - $300,000 | | **☐** | $50,000 - $75,000 | **☐** | $300,000 - $500,000 | | **☐** | $75,000 - $100,000 | **☐** | Over $500,000 | | | | | |
| **Section C – Project Overview** | | | | |
| Project Title:  Is this project | | | | |
| ☐ A new initiative  ☐ An expansion or new phase of an existing program *(please explain how the project is being expanded)*:  ☐ An event  **Please provide a brief description of the project:**    **Project Grant Request *(as per your attached budget)*: $** | | | | |
| **What is the specific demographic for the project? *(Choose all that apply)***  ☐ General Public ☐ Children ☐ Men ☐ Women ☐ Youth ☐ Families ☐ Newcomers  ☐ Seniors ☐ LGBTQ2S+ ☐ Black, Indigenous and People of Color ☐ Persons with Disabilities  ☐ Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | |
| What is the anticipated - **Project Start Date**: **Project Completion Date**: | | | | |

| **Section D – Project Information** | |
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| The Anti-racism Grant Funding Program aligns with the purposes outlined in City of Edmonton Bylaw 19573 which is to catalyze action on racism and anti-racism in Edmonton. This will be accomplished through investing in efforts that; address hate, build community capacities and cultural understanding, actively bring awareness, training or education to fellow citizens; and enhance knowledge of anti-racism in Edmonton. The program builds upon Edmonton City Council's 50 year Strategic Plan and the goal of building a Healthy City where community and personal wellness embodies and promotes equity for all Edmontonians.  **Please check only ONE box for each of the following questions:**  **Which outcome relates most to your project?**  ☐Edmontonians are more aware of racism and its impact and have a greater understanding of how to take action to address it.  ☐ Edmontonians will be knowledgeable of the community organizations that are working to dismantle individual, systemic and structural racism.  ☐ Edmontonians will work together to build a more diverse, inclusive and equitable city guided by anti-racism.  **What is the primary activity of your project?**  ☐ address racially motivated hate  ☐ build community capacity and cultural understanding  ☐ promote awareness, training, and education  ☐ involve research, monitoring and evaluation on diversity, anti-racism, and/or discrimination | |
| 1. **Please tell us a) why you have chosen to do this project, b) how it will contribute to the outcome you have**   **selected and c) why your organization is best positioned to lead this work.** | |
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| 1. **Please outline a) the activities of the project and b) a clear timeline associated with those activities.** | |
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| 1. **a. What is the demonstrated need for this work in the community?**   **b. How will the project address that need?** | |
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| 1. **How will you ensure your project is accessible to its participants and the broader public?** | |
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| 1. **Are there experts, professionals, knowledge keepers, people with lived experience, etc. supporting the project?**   **If so, in what ways?** | |
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| 1. **a. Have partnerships and/or collaborations specific to the project been identified?**   ☐Yes  ☐No  ☐N/A | |
| **b. At what stage are the partnerships and/or collaborations? *(select one)***  ☐ no partners will be involved with this project  ☐ initial ideas have been explored for partnerships/collaboration  ☐ conversations have taken place with partners/collaborators relative to the project  ☐ partners/collaborators have verbally confirmed their involvement and support of the project  ☐ partners/collaborators are committed. and have expressed their interest and role in (Attach letter of support)  **c. If partnerships and/or collaborations specific to the project have been identified, please briefly**  **provide details about the partnerships and/or collaboration and their role in the project.** | |
| 1. Approximate number of people who will be directly impacted by the project:   Approximate number of people who will be indirectly impacted by the project:  Please briefly explain how these numbers were determined: | |
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| 1. **a) Will your project develop any tools or resources?**   ☐Yes  ☐No  **b) If yes, how will the tools or resources benefit communities, organizations or individuals?** | |
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| 1. **a) How will you determine whether your project achieves what you set out to achieve *(please refer back to the outcome you selected above)*?**   **b) How will you measure these results in order to know?** | |
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| 1. **If you are applying for the Project Ready Matching Grant, please briefly explain the source of your approved matching funding. *(Attach letter of confirmation or attach bank statement to show that funds have been deposited)*** | |
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| **Section E – Budget** |
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| **Please attach the** [**budget**](https://docs.google.com/spreadsheets/d/1rtrhOHmMDop2wjhNzQA0lgOeio-PUH6P79jusGlY2Vs/edit?usp=sharing) **(use the linked form).** |