CONTAC	<u>CT INFO</u>
First Na	me
Last Nar	me
Co-op N	ame
E-mail	
Preferre	ed Phone Number
Pronour	าร:
	○ They
	○ She
	О Не
	O None of the above
Age Ran	ge:
	O Youth (12-24)
	O Adult (25-54)
	O Older Adult/Senior (55+)
	O Prefer not say

Address:					
The preferred way for us to connect with you? Please select all that apply:					
○ Phone					
○ Email					
O Text					
PROJECT INFO					
What is the name of your project?					
Which area will your project make an impact (choose all that apply)					
O Reducing your co-op's environmental footprint					
O Enhancing social inclusion and community engagement					
O Encouraging co-operation among co-operatives					
O Pursuing reconciliation with Indigenous communities					
O Promoting sustainable food systems and food security					

VANCOUVER ISLAND COMMUNITY IMPACT GRANT PROGRAM

When will your project take place? Include Month, Day and Year. If you do not know the exact date please provide an approximate date or date range. Who will help you plan and execute your project? Choose all that apply. O Family/Housemates O Fellow Co-op members O Community members O Other How will you promote your project? Choose all that apply. O Word of mouth O Posters/flyers O Social media E-mail O Other How many people do you expect to be involved or impacted by your project? O 5 or less O 6-10 O 11-20 O 21-50 O 51-100

O More than 100

Describe your project idea and vision. Tell us how it will impact the area(s) you chose above. (Attach additional pages as needed.)					

VANCOUVER ISLAND COMMUNITY IMPACT GRANT PROGRAM

EXPENSES

Category	Item	Budgeted Amount
Food		
Supplies/Materials		
Rental Fees		
Promotion		
City Permits		
Honourarium (500 max)		
OTHER ITEMS:		

Total Budget
How much are you asking for from the Vancouver Island Community
Impact Fund? (can not be more than \$5000)

VANCOUVER ISLAND COMMUNITY IMPACT GRANT PROGRAM

Do you have other funding support? Please list the source and amount Eg. Co-op Funds, Donations

Source	Amount
Has the board approved the submis	sion of this project and agreed to
the terms and conditions? (please of	ircle)
Yes or no	
Board contact information:	
Name:	
Contact number	
E-mail	
How did you hear about the Vancou	
○ Neighbour	
 Newsletter 	
○ Board	
O Event	
O Website	
O Social Media	
Thank you for applying to receive a To submit your application please s along with any questions you may	send it to impactgrant@chf.bc.ca