

Neighbourhood Small Grants - for individuals only

Shuswap Community Foundation

Acceptance of Terms and Conditions*

Yes, I have read and accept the Terms and Conditions of the Neighbourhood Small Grants. (A copy will be emailed to you after you submit your application)

[Terms and Conditions](#)

Choices

yes

Legal First & Last Name*

(For issuing cheques & direct deposit)

Character Limit: 50

Preferred Name

(If different from Legal Name above)

Character Limit: 50

Email*

(account you check regularly)

Character Limit: 50

Pronouns

(Select all that apply)

Choices

They

She

He

None of the above

Your age range*

Choices

Youth (12-24)

Adult (25-54)

Older Adult/Senior (55+)

Prefer not to say

What is your preferred way for us to connect with you?*

Please select all that apply. (Note: Grant confirmation will arrive by email, check regularly)

Choices

Email

Phone call

Text

What languages do you feel most comfortable using?*

Please select all that apply.

Choices

English

French

Indigenous language (please advise below)

Arabic

Cantonese

Mandarin

Punjabi

Spanish

Tagalog

Vietnamese

None of the above (please advise below of language not listed)

Indigenous language or other language used*Character Limit: 50*

If the grant funds will be paid directly to you through direct deposit to your bank account or by cheque, you can skip this question.

If you want the grant funds paid to a parent/guardian or partnering organization, who can receive the grant money for you, fill in the information below.

NOTE: This is different from applying on behalf of an organization which is not allowed.

Parent/Guardian Information

Parent/Guardian Name or Organization Name:	
Relationship to you (the applicant):	
Parent/Guardian Phone	
Parent/Guardian Email	

Previous applications*

Have you applied to any of the Neighbourhood Small Grant streams before? (NSG, Responsive-NSG, Youth-NSG and/or Green-CNSG)

Choices

yes

no

if yes,

how many years have you received funding?

Choices

1 year

2 years

3 years or more

previous funding*

Are you applying for a project funded before in previous years? Or is this a new idea?

Choices

Funded before in a previous year

New idea

previous funding response

If your project was funded in the past, please tell us why this project is needed again.

How will this year's project expand, change, add to, or be different from previous years?

Character Limit: 500

Part 2: Tell us about your project: It's ok if you aren't sure of all the details right now. Tell us your idea.

What is the name of your project?*

Character Limit: 200

My project type is:*

(select all that apply)

Choices

Community event (block party, etc.)

Skills sharing (workshop, event, etc.)

Resource sharing (Care packages, tool/book library, etc.)

Gardening & greening (community garden, etc.)

Art installation (murals, yarnbombing, etc.)

Other:

Not sure? Ask your community NSG Coordinator for help with your application.

Describe your project idea (and vision).***How will it connect neighbours?***Character Limit: 4000***Does your project address any of the following areas?***

(Select all that apply)

Choices

Climate Change

Circular Economy

Decolonization

Discrimination & Racism

Equity & Inclusion

Food Security Systems

Systems Change

Truth & Reconciliation Calls to Action

Other (please specify)*Character Limit: 200***How does your project address any of the areas you selected?****Character Limit: 500***When will your project take place?***

If not sure right now, tell us your best guess date.

*Character Limit: 10***Where will you hold your project?***

(Select all that apply)

Choices

Virtual (Zoom, Facetime, etc.)

Community space (community centre, neighbourhood house, etc.)

Outdoors (local park, beach, etc.).

In a home or private residence (backyard, living room, etc.)

further info on spaces to be used

space to be used	name	address
name of community space		
name of outdoor space		

Other:		
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Who will help you plan and do your project?*

(Select all that apply)

Choices

Family/housemates

Neighbours

Friends

Community staff (From a neighbourhood house, school, community centre staff, etc.)

Other:

How will people learn about your project?

(Select all that apply)

Choices

Word-of-mouth

Posters/postcards

Social media

Email lists

Other:

website/social media account

If you have a website or social media account connected to your project, add your link here:

Character Limit: 200

Your project must follow current Public Health Guidelines.*

How will you adjust your project if needed? (select all that apply)

Choices

Move virtual if needed

Move outdoors if needed

Be flexible with my project date

Reduce my participant numbers

Ensure everyone is wearing masks

Other:

Number of people*

Approximately how many people will participate or directly benefit from your project?

Choices

5 people or fewer

6-10 people

11-20 people

21-50 people

51-100 people

More than 100 people

I don't know yet

Part 3: Project expenses or budget: Please share your estimated project costs and expenses

Budget: The goal of the grant is to contribute to expenses associated with your project such as food, art and craft supplies, gift cards, Skype or Zoom subscriptions and honorariums. Complete the budget below with as much detail as possible.

NOTE: You may not need to complete each line of the budget. Projects have different expenses. For more details on what is allowed, read the **Terms and Conditions** pages.

Budget

Description	(please share a short description of individual budget lines)	Amount:
Food Items:		
Supplies or materials:		
Rental Fees or Virtual Hosting Fees (Example: Zoom, room rental, etc.):		
Promotion (Example: posters, social media ads, etc.):		
Honorarium(s) (up to \$350 can be awarded in honorariums):		
Permit and/or Insurance (if applicable):		
Other:		

Other:		
Total Budget		
How much are you asking from the NSG Program? You may not ask for more than \$500		
Do you have other funding or support? Please tell us about any other funding or resources.		
Example: Donations from grocery stores or gift card from local business		

If you don't receive the full grant amount, how will you change your project?*

Select all that apply.

Choices

Reduce the participant numbers

Reduce materials

Look for other donations

Find less expensive rental space (example: neighbourhood house)

Other:

How did you hear about Neighbourhood Small Grants?*

Check all that apply

Choices

CNSG project leader

Email from community NSG Coordinator

Attended an NSG project

Local community organization

School

Neighbour

E-Newsletter

Poster/Brochure

Website

Neighbourhood Grants Committee Volunteer

Other

Social Media (please specify), other

List of social media: Instagram, Facebook, TikTok, Other

Character Limit: 100

Part 4: Voluntary additional information about you: Are we reaching every part of our communities with the NSG?

The following questions are optional and voluntary. This means that **you do not have to answer them**. However, your answers can help us know if we are reaching out to the diversity of the communities we serve. The information is for our use only and is confidential.

Gender Identity

(select all that apply)

Choices

Female

Male

Two Spirit

Non-binary

None of the above

Age Range

Choices

12 and under

13-18

18-24

25-34

35-44

45-54

55-64

65-74

75 and older

Were you born in Canada?

Choices

yes

no

Do you identify as Indigenous?

Choices

yes

no

How long have you lived in your current community?

Choices

Less than one year

1-2 years

3-4 years

5-10 years

10 years or more

Please select all that apply

Choices

Renter

Homeowner

Living in supportive housing

Living in co-op housing

Living in temporary shelter

None of the above

What type of home do you live in?

Choices

Single-family house

Townhouse

Duplex

Low/Mid-rise (2-6 floors)

High-rise

Basement suite

None of the above