



REQUEST FOR FINANCIAL ASSISTANCE GRANT APPLICATION PROCESS

To request Financial Assistance from:

MEDICINE HAT PUBLIC SCHOOLS' EDUCATION FOUNDATION (the "Foundation")

FORM:

Applicants who are seeking financial assistance are required to complete the attached application form.

PROCESS:

There are four application deadlines per year:

- September 15
- November 15
- February 15
- April 15

Only application forms completed in full (including support material where applicable) will be accepted. No exceptions will be made for late applications. If the deadline falls on a weekend or statutory holiday, applications and any support material may be delivered or postmarked on the next business day. Please note that limited funds are available for each fiscal year, as such the Foundation would encourage applicants to apply as early as possible.

GRANT AMOUNT:

Applications are accepted for either a Small Grant (less than \$1,000.00) or Large Grant (\$1,000 to \$10,000). Subject to approval, grant amounts are generally limited to a maximum of \$10,000. Applicants are reminded that all grants are awarded on a year-by-year basis and are not to be seen as an automatic ongoing source of funding.

QUESTIONS:

Should you have any questions of clarification, please contact Debbie Terlson at (403) 528-6705 or email debbie.terlson@sd76.ab.ca.

ASSESSMENT CRITERIA:

In assessing the desirability of the Project, the following will be considered by the Foundation:

- educational enrichment for the school community; and/or
- applications that enhance wellness.

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GUIDELINES:

- The group or individual applying must be affiliated with Medicine Hat Public School Division.
- The organization applying must meet the definition of a qualified donee as per Canada Revenue Agency (i.e. mainly other approved charitable organizations). The Medicine Hat Public School Division meets the requirements of a qualified donee.
- The group or individual making the application may be asked to attend a meeting of the Foundation Board to provide further information and/or clarification.
- Successful applicants must acknowledge the Foundation's support in all project publicity, using its full name on first mention. Where appropriate, include the Foundation's logo and follow branding guidelines. To request logo files or usage guidance, please contact Marley Steinwandt.
- Funds must be used for purpose for which they were requested.
- Upon completion of the project, the applicant may be asked to submit a final letter acknowledging the success of the project. Grantees are encouraged to share major updates, media coverage, and promotional materials with the Foundation.
- After the project is completed, applicants must provide a signed final statement of expenses and revenue, including receipts as requested.
- The Foundation will only pay up to the grant limit.
- Funds not used for the agreed upon purpose must be returned to the Foundation.
- For large grant applications, the Foundation should not be relied upon as the sole source of financial support and may be encouraged to seek funding from an outside agency or group for matching funds.
- The Foundation reserves the right to limit or refuse financial assistance.
- The Foundation assumes no responsibility, legal or otherwise, for any special project unless specifically under a separate agreement.

NOTIFICATION:

Applicants typically will be notified within 30 days of the grant deadline, or contingent of the meeting dates of the Education Foundation Board.



**REQUEST FOR FINANCIAL ASSISTANCE
GRANT APPLICATION PROCESS**

APPLICATION

Organization/School: _____

Contact Name: _____

Position in the Organization/School: Clerical

Educational Assistant Classroom Teacher

School Administrator (Please indicate position title): _____

Other (Please indicate position title): _____

Email Address: _____

Contact Number: _____ **Cell:** _____

Name of Project: _____

Anticipated Start Date: _____ **Completion Date:** _____

Other funding sources that were pursued prior to applying to the Foundation:

School Principal (School Generated Funds) School Principal (Mini-Budget)

Facilities Department I.T. Department

Other Division Official(s) No Other Sources

↳ Official's Name(s): _____

Other Sources of Funding and Status (if applicable):

| Agency | Funds Requested | Status | | |
|--------|-----------------|--------------------------|--------------------------|--------------------------|
| | | Approved | Rejected | Pending |
| | \$ | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| | \$ | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| | \$ | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| | \$ | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| | \$ | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

Is this project viable without support from the Education Foundation? Please explain.



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Type of Application:

Small Grant (< \$1,000)

Large Grant (\$1,000 - \$10,000)

Funds Requested from Foundation: \$

Total Project Cost: \$

How will the funds be used? (Include details about the project and educational component)

Empty text box for describing fund usage.

Why is this project important to you and/or the school?

Empty text box for explaining project importance.

Is any ongoing maintenance required for the project?

Yes checkbox

No checkbox

If yes, who will be responsible and how will it be funded?

Empty text box for providing maintenance details.

Additional details and supporting documents can be emailed to marley.steinwandt@sd76.ab.ca

NOTE: If applicant is within MHPSD, please leave this section blank.

Registered with the Alberta Gaming and License Commission?

Yes checkbox

No checkbox

If yes, please provide your AGLC Number:

Empty text box for AGLC Number.

Applicant's Signature

Date

I, as principal, am supportive of this project and funding request.

Principal's Signature

Date



**REQUEST FOR FINANCIAL ASSISTANCE
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BUDGET

| Revenue Sources | Anticipated | Actual |
|----------------------------------|-----------------------------|--------|
| | \$ | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| Total Anticipated Revenue | | |
| | Total Actual Revenue | |

| Expenditures | Anticipated | Actual |
|---------------------------------------|----------------------------------|--------|
| | \$ | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| Total Anticipated Expenditures | | |
| | Total Actual Expenditures | |

Any additional budget comments?

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