



Municipality of the County of Pictou Council Grant Application

Deadline last day of February

Name of Organization: _____

Contact Person: _____

(Please make sure the contact person is the person receiving the cheque and all contact information is correct)

Mailing address _____

Phone: _____

Email Address: _____

Registry of Joint Stocks Number: _____ and/or Federal Charitable Registration Number: _____

Amount of Grant Requested: \$ _____

PROJECT DESCRIPTION

What is this project?

What communities will benefit from this project?

Does your organization receive assistance from the Municipality of Pictou County? If yes, please list the forms of assistance provided.

If you received grant funding in the past from the Municipality, have you returned your grant reporting form?

Yes No When did you receive your most recent grant? _____

SOURCES OF FUNDING

Have you applied for other funding for this project/program/service?

Yes No

If yes, please list

LEVEL OF GOVERNMENT	DEPARTMENT OR AGENCY	AMOUNT REQUESTED	AMOUNT CONFIRMED
Federal			
Provincial			
Municipal			
Other Funding Bodies			
	Totals		

FINANCIALS

1. Please attach your organization's most recent financial statement.
2. Please summarize the major elements of the budget for the project (or attach a copy of the budget for your project):

NOTE: For applications of \$500 or less it is not necessary to complete this section. Simply attach the financial statement or Treasurer's report for the most recent fiscal year.

EXPENDITURES	AMOUNT
TOTALS	

_____ Signature _____ Date

_____ Print Name

I am authorized to submit this application on behalf of the organization.

Grant requests will not be accepted past the deadline of the last day in February. Please ensure all areas of the form are filled out and all accompanying information is provided when the form is submitted.