

# GRANT FUNDING

Engage Sport North will support administrative aspects of grant funding to Northern British Columbia on behalf of Northern BC Community Sport Development Society. The purpose of the grants; to provide financial assistance to individual athletes or teams in Northern BC, creating opportunity to travel and compete. Individuals or parties benefiting from this grant program must operate or be located in the Northern Rockies Regional Municipality and/or any of the following Regional Districts; Central Coast, Cariboo, North Coast, Kitimat-Stikine, Bulkley-Nechako, Fraser-Fort George and Peace River.

This grant funding is based on an annual contribution from NBCCSDS of \$15,000. All grants will be philanthropic in nature and support and promote sport participation in Northern BC. Engage Sport North is committed to ensuring our communities have knowledge around the assistance that creates this barrier free access to organized sport.



Applications, based on the attached **Application Form – Grants** are to be submitted to the Executive Director, Engage Sport North Society through online and in person applications. Selection of deserving athletes/teams will be based on the following criteria:

- a. Application must be completed by athlete applicant personally (not by a parent or coach).
- b. A letter of support must be presented by coach or an advisor.
- c. Competition must happen after application date.
- a. Athletes who have achieved regional or provincial status will be eligible;
- b. Each athlete or team will be eligible for one grant per year only;
- c. The funds will be used for travel or registration fees;
- d. Normally, the maximum annual allocation of funds will not exceed \$500.00 to any one individual athlete; normally, the maximum annual allocation of funds will not exceed \$2500.00 to any one team application;
- e. Must be a BC Athlete;

## APPLICATION

The Grant Advisory Committee of the Engage Sport North Society Board of Directors will use the above criteria as guidelines. All grant applications must be approved by the Committee. The decisions of the Committee will be final.

The Grant Advisory Committee will meet 3 times each calendar year to review applications and disperse funds. The allocation of funds will depend on the amount and availability of funds.

**Please have Athlete fill out. We love hearing from them and it is a great learning experience.**

### Athlete/Team Information

Name: \_\_\_\_\_ Birth Date (mm/dd/yr): \_\_\_\_\_

Sport: \_\_\_\_\_

Head Technical Coach: \_\_\_\_\_ Coach Contact Numbers: \_\_\_\_\_

Coach Email Address: \_\_\_\_\_

### Personal Information

Phone Number: \_\_\_\_\_ Email Address: \_\_\_\_\_

Street: \_\_\_\_\_ City: \_\_\_\_\_

Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_

### Mailing Address (if different than above - cheque will be sent to this address)

Street: \_\_\_\_\_ City: \_\_\_\_\_

Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Name (Payee name to appear on cheque if grant application approved): \_\_\_\_\_



**Sport Information**

Are you targeted (carded) athlete? \_\_\_\_\_

Do you receive Sport Canada(national) Carding Funds? \_\_\_\_\_

Do you receive Provincial AAP Funding? \_\_\_\_\_

Primary Training Site: \_\_\_\_\_

Are you applying as an individual or team? \_\_\_\_\_

Team/Club: \_\_\_\_\_

**Scope of Achievement and Performance**

Please indicate highest achievement in your sport, years participated, and results.

Include all performances (if applicable) for the following: World Championships, Commonwealth Games, Pan-American Games, World Cup Circuit, National Championships, Provincial Championships, Canada Games

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**If approved, what will the funds be used for?**

List of Expenditures: \_\_\_\_\_ Who is covering those costs? \_\_\_\_\_

ITEMS	COST
<i>example: hotel</i>	\$250

Please include a budget with detailed expenses:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_



**Competition Information (must be after Application Date)**

Date of Competition: \_\_\_\_\_ Location: \_\_\_\_\_

Name of Competition: \_\_\_\_\_

Please indicate how your team or athletes have qualified for the competition? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Amount requested (maximum \$500 for individual applications \$2500 per team application) \_\_\_\_\_

A letter of support (signed and dated) must be presented by a coach or advisor. Support letters can be sent to Mandi Graham [mgraham@engagesportnorth.com](mailto:mgraham@engagesportnorth.com) **Subject line:** Athlete Grant Application (Insert Name Here) Support Letter

*I declare the information in this application is accurate. This is to certify that the grant will be used for the championship/competition as applied for, and if the athlete does not attend, due to illness, injury or other reasons, the funds will be reimbursed back to Engage Sport North Society. Coaches must sign below even if there is no competition information.*

Athlete/Applicant Name (please print) \_\_\_\_\_ Signature \_\_\_\_\_

Coach Name (Please print) \_\_\_\_\_ Signature \_\_\_\_\_

Date Y/M/D \_\_\_\_\_

