Grant Application for Funding – Supporting Black Canadian Communities (SBCC) Initiative

COMPLETING THE FORM

This is a standard form used by multiple programs at Employment and Social Development Canada. In Section B, you will need to identify the funding request to which you are applying.

You must read the Applicant Guide that is specific to the program to which you are applying. Each funding program may have specific eligibility requirements, priorities, or supporting documents to submit with the completed Application Form.

Unless otherwise indicated in the Applicant Guide or on this form, you must complete all parts of the Application Form. Employment and Social Development Canada reserves the right to refuse applications that are incomplete or contain errors. We recommend that you save the Application Form often.

If a closing date is posted, you must submit your Application Form by that date. We will not accept applications received after a closing date.

This document includes the following sections:

Section A – Notice to Applicants

Section B – Program Information

Section C – Application Form

Part 1 – Organization

Part 2 – Project Proposal

Part 3 – Budget

Part 4 – Program Specific Questions and Checklist

Part 5 – Attestation

HOW TO SUBMIT THE FORM AND SUPPORTING DOCUMENTS

Consult the Applicant Guide for instructions on how to submit your application and supporting documents.

SECTION A – Notice to Applicants

Attestation

In order for your application to be eligible, you must have the authority:

- to submit project proposals for the applicant organization, and
- to enter into contracts and agreements on behalf of this organization

By checking the 3 boxes in Section C – Part 5 in the form, you certify that the information in the application is:

- true
- accurate, and
- complete

You must provide:

- your name
- your title, and
- the date

No signature is required.

Information in the form

The completion of this application form is voluntary. We will use this information to assess your project.

We may also use or disclose your application information:

- to share information with others outside the government as a part of the review process
- for policy analysis
- to do some research
- for evaluation

Note that these additional uses or disclosures of your personal information will never affect your relationship with this department or any other government organization.

Personal information

We ensure to manage personal information according:

- to the *Department of Employment and Social Development Act*
- to the *Privacy Act*, and
- other applicable laws

You have the right:

- to protect your personal information, and
- to access or change your personal information

If you have privacy concerns or you are not satisfied with our response, contact the Office of the Privacy Commissioner of Canada.

Access to information

After this process, the information on successful applications will be available on Open Government.

Your application is also subject to the *Access to Information Act* (ATIA). The ATIA gives every person a right to access information under the department's control, except for some exemptions.

Find instructions for accessing this information. You can also visit a Service Canada Centre.

SECTION B – Program Information

Select only one funding request per application.

Supporting Black Canadian Communities (SBCC) Initiative

The program provides capital assistance to Black organizations in Canada to build capacity to better fulfill their missions and better serve Black communities in Canada.

Funding requested:
- ◯ Equipment purchase for work or community space
- ◯ Renovation or retrofit of an existing workspace or community space
- ◯ Both equipment purchase and renovation or retrofit

SECTION C – Part 1 – Organization

ORGANIZATION IDENTIFICATION

1. Legal Name (Organization's full name, as it appears on legal documents)

2. Operating Name (if different from legal name)

3. Year Established (Year the organization was originally created.)

4. Organization Type

◯ Not-For-Profit ◯ Private Sector ◯ Public Sector

5. Organization Category - For example: Sector councils; University; Municipal Government; etc. (see Applicant Guide for more examples).

6. Canada Revenue Agency (CRA) Business Number - Unique 15-digit number that is assigned to your business or legal entity by CRA.

If you do not have a CRA Business Number, please select one of the checkboxes to provide other registration information or proof of operations document(s).

For example: Your provincial/territorial corporation number (i.e. number found on your Letters Patent) or your federal corporation number with Industry Canada (see Applicant Guide for further details).

◯ Other Registration Number:

or

◯ I have provided a separate document confirming the proof of operations for my organization.

Specify type of document(s):

7. Organization Primary Address

Street number and name

City or Town

Province or Territory

Postal Code

Country

Telephone Number and Ext.

E-mail Address

8. Mailing Address - Is it the same as the Organization Primary Address?

◯Yes ◯No

9. Organization's Primary Activities

Select the target group(s) that best aligns with your organization's primary activities (more than one may be selected).

- ☐ Select all groups
- ☐ Seniors
- ☐ Newcomers
- ☐ Visible Minorities
- ☐ Youth
- ☐ Women
- ☐ LGBTQ2
- ☐ People with Disabilities
- ☐ Low Income
- ☐ Remote / Rural
- ☐ Individuals Experiencing Homelessness
- ☐ Official Language Minority Communities
- ☐ Indigenous (specify)
- ☐ First Nations
- ☐ Inuit
- ☐ Metis
- ☐ Urban/Non Affiliated
- ☐ Other (specify)
- ☐ Not Applicable

ORGANIZATION CONTACTS

PRIMARY CONTACT - This should be your primary contact person with respect to this application for funding.

10. Given Name/Surname

Name:

Surname:

11. Position Title

12. Preferred language of communication

Written: ◯English ◯French Spoken: ◯English ◯French

13. Primary Contact - Address

◯Same as Organization Primary Address ◯Same as Organization Primary Mailing Address ◯Different (include below)

SECONDARY CONTACT - This should be your secondary contact person with respect to this application for funding in case we cannot reach the primary contact.

14. Given Name/Surname

Name: | Surname:

15. Position Title

16. Preferred language of communication

Written: ◯ English ◯ French Spoken: ◯ English ◯ French

17. Secondary Contact - Address

◯ Same as Organization Primary Address ◯ Same as Organization Primary Mailing Address ◯ Different (include below)

18. Does your organization owe any amounts to the Government of Canada?

◯ Yes ◯ No

If yes, complete the fields below for each amount owing.

Amount Owing	Nature of the amount owing (e.g. taxes, penalties, overpayments)	Department or agency to which amount is owed	**19. If an amount is owing, is a payment plan in place?**
A.			◯ Ye ☐
B.			◯ Ye ☐
C.			◯ Ye ☐
D.			◯ Ye ☐

SECTION C – Part 2 – Project Proposal

PROJECT PROPOSAL IDENTIFICATION

20. Project Title

21. Planned Project Start Date (YYYY-MM-DD) | **22. Planned Project End Date** (YYYY-MM-DD)

23. Amount requested from Employment and Social Development Canada

PROJECT PROPOSAL DESCRIPTION

24. Project Summary In 500 words or less, describe the need of the proposed project including what it aims to achieve (objective and anticipated results), and who is the targeted group.

25. In 500 words or less, describe how the proposed project meets the objective(s) and/or priority(ies) of the funding program under which you are applying.

26. Project Activities and Timelines (Provide the activities and their timelines that will be taking place as part of this proposed project.)

Activities	Timelines	

Remove

Add Row

27. Will any of the proposed project activities be delivered at your organization's primary address?

◯Yes ◯No

Will any of the proposed project activities be delivered in a different location from your organization's primary address?

◯Yes ◯No

28. Will the project or any of its activities involve or benefit people in English or French linguistic minority communities in Canada, in some way?

◯Yes ◯No ◯Not Applicable

29. Is your project targeting vulnerable groups?

◯Yes ◯No

If yes, select the specific target group(s) that applies to your project.

- ☐ Select all groups
- ☐ Seniors
- ☐ Newcomers
- ☐ Visible Minorities
- ☐ Youth
- ☐ Women
- ☐ LGBTQ2
- ☐ People with Disabilities
- ☐ Low Income
- ☐ Remote / Rural
- ☐ Individuals Experiencing Homelessness
- ☐ Official Language Minority Communities
- ☐ Indigenous (specify)
- ☐ First Nations
- ☐ Inuit
- ☐ Metis
- ☐ Urban/Non Affiliated
- ☐ Other (specify)

SECTION C – Part 3 – Budget

30. PROJECT COSTS - (expenses) for the eligible activities or services of the proposed project

List each eligible activity or service:	Cost is: Cash	Cost is: Donation (In-kind)	Cost ($ value)	
	☐	☐		
	☐	☐		
	☐	☐		
	☐	☐		
	☐	☐		
	☐	☐		
	☐	☐		
	☐	☐		
	☐	☐		Remove ?
Total cost of eligible activities and/or services*				Add Row

31. FUNDING SOURCES - (revenues) for the proposed project costs noted above

List Organization Name for each Funding Source (can be other governments, a private sector organization, or self-funded)	Funding Amount is: Cash	Funding Amount is: Donation (In-kind)	Funding Amount ($ value)	Funding amount is: Confirmed (guaranteed)	
Amount requested from Employment and Social Development Canada**					
	○	○		☐	
	○	○		☐	
	○	○		☐	
	○	○		☐	
	○	○		☐	
	○	○		☐	
	○	○		☐	
	○	○		☐	Remove ?
Total funding for eligible activities or services*					Add Row

* Total cost in Question 30 and total funding of eligible activities and/or services in Question 31 must equal each other.
** Amount must correspond with the amount listed in Question 23.

BUDGET DETAILS

32. Use this field to provide any further budget details that you may find necessary in describing your project. (This field is optional if you want to provide more information.)

SECTION C – Part 4 – Program Specific Questions and Checklist

Supporting Black Canadian Communities Initiative

Program Specific Questions

33. Select the origins of the Black Canadian communities in Canada your organization serves.

- ☐ Caribbean origins
- ☐ African origins, including Eastern, Central, Western and Southern
- ☐ African Nova Scotians
- ☐ All of the above

Program Checklist

Please review the following checklist carefully. Errors or incomplete applications will result in delayed processing and/or rejection.

- ☐ I attest that the organization is Black-led (i.e. has Black leadership at all levels of management)
- I attest that I am either ☐ the owner of the building or ☐ have a lease and written approval of building owner to undertake the project (select only one option).
- ☐ I attest that the project is not located on Government of Canada property, nor in a private home or dwelling.
- ☐ I have provided a digital picture of the workspace or community space I want to improve, if my project is for a renovation.
- ☐ I provided one external estimate if my project is for renovation of an existing space.
- ☐ I will attest to the contents in Section C – Part 5 of this application form

HOW TO SUBMIT THE FORM AND SUPPORTING DOCUMENTS

Consult the Applicant Guide for instructions on how to submit your application and supporting documents.

SECTION C – Part 5 – Attestation

In order for your application to be eligible, an official representative who has the capacity and the authority to submit project proposals and enter into contracts and agreements on behalf of your organization must attest to the following:

- ☐ I have the capacity and the authority to submit this Application for Funding on behalf of the applicant organization.
- ☐ I certify and warrant on behalf of the organization and in my personal capacity that the information provided in this Application for Funding and any supporting documentation is true, accurate, and complete.
- ☐ I have read the Applicant Guide and understand the program's requirements.

Official Representative Name (print)	
Title (print)	Date (YYYY-MM-DD)
Official Representative Name (print)	
Title (print)	Date (YYYY-MM-DD)
Official Representative Name (print)	
Title (print)	Date (YYYY-MM-DD)