For Official Use Only:

CSGC # _____ **RC No.** _____

Program: Reaching Home – Community Capacity and Innovation (CCI) Funding

Concept Application Form

Completing the form

You must read the Applicant Guide that is specific to this Call for Concepts.

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

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

This document includes the following sections:

Notice to Applicants

Part 1 – Organization

A. Organization Information

B. Organization Contact

Part 2 – Project Proposal

A. Concept Identification

B. Concept Description

C. Priority Areas

Part 3 – Funding

A. Anticipated sources of Funding

Part 4 – Attestation

How to submit the form and supporting documents

Consult the Applicant Guide for instructions on how to complete the Concept Application Form. Once completed, please send your Concept Application Form and supporting documents by email to hkd-dci@hrsdc-rhdcc.gc.ca.

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 Part 4 of 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 Concept 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.

Part 1 - Organization

A. Organization Information

1. Legal Name *	2. Operating (Common) Name * (mandatory field if different from legal name)	3. Business or Registration Number *
4. Organization Type *	5. Organization Category *	6. Year Established *
7. Organization Address *		

8. City or Town *	9. Province or Territory *	10. Country *	11. Postal Code *
12. Telephone Number * Ext.	13. Fax Number	14. E-mail Address *	
15. Mailing Address * (mandatory field if different from Organization Address)			
16. City or Town * (mandatory field if different from Organization Address)	17. Province or Territory * (mandatory field if different from Organization Address)	18. Country * (mandatory field if different from Organization Address)	19. Postal Code * (mandatory field if different from Organization Address)
20. Telephone Number * Ext. (mandatory field if different from Organization Number)		21. Fax Number (if different from Organization Number)	

B. Organization Contact

Primary contact - This should be your primary contact person with respect to this concept application.

22. Given Name *	Surname *
23. Position Title	24. Preferred language of communication * Written: ◯ English ◯ French Spoken: ◯ English ◯ French

25. Telephone Number * Ext. (mandatory field if different from Organization Number)	26. Fax Number	27. E-mail Address

Secondary contact - This should be your secondary contact person with respect to this concept application in case we cannot reach the primary contact.

28. Given Name *	Surname *
29. Position Title	30. Preferred language of communication * Written: ◯ English ◯ French Spoken: ◯ English ◯ French

31. Telephone Number * Ext. (mandatory field if different from Organization Number)	32. Fax Number	33. E-mail Address

Part 2 - Proposed Concept

A. Project Identification

Note: Reaching Home Community Capacity and Innovation (CCI) Funding is available for the following fiscal years: 2021-2022, 2022-2023, and 2023-2024. Multi-year projects will receive priority.

34. Concept Title *

35. Planned Project Start Date (yyyy-mm-dd) *	36. Planned Project End Date (yyyy-mm-dd) *

B. Concept Description

The objective of this Call for concepts is to support projects that aim to test or develop innovative approaches to:

a) build capacity within the homeless-serving sector, or,

b) contribute to the elimination or prevention of homelessness

37. Project Objectives (must be clearly linked to the objectives of the program to which you are applying). *

For the purposes of this call, we define innovation as “the trying of new things.” Innovative approaches may include activities that are new at a national or regional level.

38. Please describe how your proposed concept meets the above definition of “innovative approaches”: *

39. Please describe the proposed activities and expected results of the project (must be clearly linked to the call objectives). *

C. Priority Areas

Proposed concepts must address at least one of the priority areas of the call. Please refer to the Applicant Guide for detailed information on the priority areas:

- approaches for specific populations
- strategic partnerships
- data collection

40. Please describe how your proposed concept addresses the call priority(ies):*

Part 3 - Funding

A. Anticipated Sources of Funding * (mandatory to complete a minimum of one row)

Note: Successful proponents under this call will be eligible to receive from $100,000 to a maximum of $600,000 in contribution funding from ESDC over 3 years.

41. **Source Name**	42. **Source Type**	43. **Cash**	44. **In-kind ($ value)**
ESDC	ESDC		
Total funding for the project			

Part 4 - 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)