



COMMUNITY GRANT APPLICATION FORM

ORGANIZATION BACKGROUND INFORMATION

Name of non-profit organization:			
Date incorporated:			
Mailing address:			
Website address:			
Name and title of person with authority to apply for this grant:			
Phone number:			
Email address:			
Organization's average annual operating budget: <i>(note: only organizations with annual operating budgets under \$2 million are able to apply for a grant)</i>			
Number of FTE employees:			
Number of volunteers:			
Number of people impacted by your work each year:			

****A copy of the organization's most recent year-end financial statements and most recent annual report must be submitted with this grant application.***

If these documents are on your website, please provide the link here:

Website link:	
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INFORMATION ON REQUEST

This program has two funding streams. One funding stream is for capital projects, specifically equipment or renovations, while the second funding stream is for title sponsorship for special events. Maximum capital grants are \$25,000 while maximum special events grants are \$15,000.

Please identify to which funding stream you are applying:	Capital Stream	Special Events
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Please describe the project that the grant will support. (*only use this space to describe the project – 1500 character limit*)

How did you determine the need? (*only use this space to describe the need- 1500 character limit*)



How many people do you estimate will be impacted by the project and in which municipalities? (1500 character limit)

How will you measure success of the project? (only use this space to describe measurement - 1500 character limit)



Project start date:	
Project estimated completion date:	

How will you sustain your project once completed? (1500 character limit) <i>(note: funding is available only for projects that will be completed within 2 years of the start date)</i>
Amount of request: <i>(note: maximum grant for capital/equipment is \$25,000 and \$15,000 for special events)</i>



If the request is to fund a particular component of your project, please describe: (1500 character limit)
(note: grant cannot be used to fund expenses incurred prior to applicant receiving notification of receiving grant which will be June 30th)

Empty text box for describing project components.

In the text box below, list the project expenses.

Expense Category		Amount
1.		
2.		
3.		
4.		
5.		
6.		
7.		
8.		
	TOTAL	



In the text box below, list the confirmed revenue sources for this project.

Name of Source		Amount
1.		
2.		
3.		
4.		
5.		
6.		
7.		
8.		
	TOTAL	

Who else have you applied to for funding to support your project and in what amount? When will you receive a response to these requests?

Funder		Amount	Response timeline
1.			
2.			
3.			
4.			
5.			
6.			
7.			

If successful with this request, what opportunities are there for BCM to promote our brand with this project? How will these be measured? (1500 character limit)



All grant applicants must speak to BCM's Grants Administrator prior to submitting application **at least one week prior to the grant deadline**. For the May 1st deadline, the conversation must take place prior to April 24th. No exceptions will be made to this application criteria.

The Grants Administrator's email address is:	communityfund@bcminsurance.com
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Please enter the name of the person from your organization who spoke to the Grants Administrator, their title and the date they spoke to the Administrator.		
Name	Title	Date

All applications must be accompanied by a 2-3 minute video describing their project. This does not need to be a professionally produced video. It can be as simple as one produced on a cell phone. If you have posted this video on YouTube and do not want to make it public, we suggest you choose the 'unlisted' privacy setting. That way it can only be viewed by viewers you designate, in our case our BCM Insurance Grant Assessors. Instructions on posting a video on YouTube can be found at <https://www.wikihow.com/Upload-a-Video-to-YouTube>.

The 2-3 minute video must answer the following questions:

- Why is this project so important to your organization?
- How does this project relate to your vision and mission?
- Why are you looking for funding to support your project?
- How will your project impact your community?

Relax . . . have some fun . . . show your passion!

What is the website address where we can see your video?

Website address:	
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Grant Application Checklist:

Please ensure that the following documents are sent to communityfund@bcminsurance.com by the grant deadline of either May 1st:

- Completed grant application
- Copy or link to your most recent year-end financial statements
- Copy or link to your most recent annual report

To ensure that they are received by the deadline, we suggest you request confirmation of receipt of email when you send the documents.

Please do not send any other attachments as they will NOT be opened or reviewed by the Grant Assessors.