

**Vital Ideas and Leadership Grants**

**2019**

**APPLICATION FORM**

**Deadline: 5pm on Thursday, November 29, 2018**

*Please review the FAQ document along with the*

*Submission Guidelines before beginning your application.*

**Cover Sheet – organization contact information**

|  |  |
| --- | --- |
| **Name of applying organization** |  |
| **Charitable registration number** |  |
| **Name of initiative for which funds are being requested** |  |
| **Street address of organization** |  |
| **Organization contact name and title** |  |
| **E-mail address of organization contact** |  |
| **Phone number of organization contact** |  |
| **Organization’s website address** |  |
| **Amount requested (up to $50,000)** |  |
| **Total current annual operating budget for organization** |  |
| **Total current annual operating budget for initiative seeking Vital Ideas and Leadership grant** |  |

***If your organization is not a registered charity:***

|  |  |
| --- | --- |
| ***Charitable partner name and address*** |  |
| ***Charitable partner charitable registration number*** |  |
| ***Charitable partner contact name, email and phone number*** |  |
| ***Charitable partner total annual operating budget*** |  |

**Application authorization**:

Name, Title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

***(Application must be approved by an organizational representative with authority to legally bind the organization.*)**

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

***(Electronic signature is acceptable)***

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**about the applying organization**

Information provided in this section is used to assess the background and reputation of the applying organization.

1. **About the organization (Limit: 300 words)**

**about the initiative**

Information provided in this section is used to assess whether the initiative for which you are applying for funding is high-impact and whether it’s at the right stage for a Vital Ideas and Leadership grant.

1. **One sentence description of initiative (Limit: 25 words)**
2. **Populations served**

|  |  |  |  |
| --- | --- | --- | --- |
|  | All ages |  | LGBTQ\* |
|  | Children – up to 11 |  | Newcomers |
|  | Youth – 12 to 18 |  | People with Disabilities |
|  | Young adults – 19 to 29 |  | Ethno-specific |
|  | Adults – 30 to 64 |  | Women |
|  | Seniors – 65 and up |  | Men |

1. **Describe the initiative and how it is improving Toronto’s quality of life. How do you know it is effective? Please use proof points and/or past evaluation results. (Limit: 500 words)**
2. **Best practices and collaborations (Limit: 150 words)**
3. **Participant story (Limit: 150 words)**

**the grant request**

1. **How could your initiative be enhanced to have a deeper impact? What is the rationale for your grant request and its potential to grow? (Limit: 400 words)**
2. **Detail of strategic activities (Limit: 300 words)**
3. **Detail of professional development activities (Limit: 300 words)**
4. **Detail of evaluation activities (Limit: 300 words)**
5. **Board List (Limit: 200 words)**
6. **Grant Request Budget**

Please provide your budget in the chart formal below.

REMEMBER: Requests MUST feature all three of the following components, within the ranges listed:

1. The idea – strategic activities to position an initiative for deeper impact ($30,000 to $40,000)
2. Professional development – to support key leadership for the idea ($5,000 to $10,000).
3. Evaluation – to develop an evaluation framework to measure the deepened impact of the initiative ($5,000 to $10,000).

TOTAL = up to $50,000

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Activity | Detail | Outcomes | Amount  Requested from this grant stream | Other support (in-kind, confirmed, pending) |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
| TOTAL |  |  | $50,000 |  |

**Attachments**

|  |  |
| --- | --- |
|  | **Audited Financials** |
|  | ***Trusteeship Agreement (if applicable)*** |