

Compassion in Action Transferable Fund Grant Application Form

Organization Name:	
Address:	
Application Contact and Title:	
Phone Number:	
Email Address:	
CRA Registration Number:	
Amount Requested:	
Date Submitted:	

**** Please review the section outlining what We Do Not Fund in the Grant Brochure before applying. ****

Answer the following questions in a concise manner following this format:

1. Provide a description of the project you are applying for, including the objective and the timeline.
2. If this is a continuing project, indicate when it was established, how it has been funded and what success you have had to date.
3. Identify any other funding sources required for this project and indicate whether the money is committed.
4. Provide a brief description of your organization's history, mandate, goals and achievements.
5. How large is your organization (number of paid staff, volunteers, number of people served)?
6. What other organizations provide similar services in your community, and what is your relationship with them?

Attach the following documents to your application:

- The project budget.
- A copy of your organization's most recent annual financial statement (operating statement and balance sheet).

****Applications without the above information and materials will be considered incomplete****

The Grant Committee of the Compassion in Action Transferable Fund will consider grant applications submitted by March 15 and by October 15 in each calendar year. **Complete applications should be submitted electronically in PDF file format to the following email address: compassioninactionfund@gmail.com.**

Approved funds can only be applied towards the project that it was intended for. A report explaining the outcomes of the project, including financial details must be provided within one year of approval. Recipients who do not comply with this request will not be considered for future grants.