

GRANT APPLICATION

Name of Organization	
Address of Organization	
Full Mailing Address	
Telephone Number & Email	
Contact Person/Title	

Primary purpose of organization: _____

Category under which greatest portion of services fall:

Social Service Sports Cultural Economic Development Other _____

Services available to all members of community: Yes No

If *no*, please list criteria for receiving your service: _____

Total Number of people that used your service within the Municipality last year: _____

Approximate number of your clients that reside in North Cowichan: _____

(Please note that North Cowichan includes the communities of Chemainus, Crofton, Maple Bay, and the Duncan area north of the Cowichan River, and outside the one square mile Duncan core.)

Amount of grant requested: _____

Describe how the grant will be used: *(e.g. special projects, operations, maintenance, etc.)*

In order to be considered for a Municipal grant, please ensure that you enclose the following: **most recent financial statement and the proposed operating budget.**

Other Information: Have you obtained a previous grant from the Municipality? Yes No
 Have you applied to another local government for funding? Yes No

If yes, please list: _____

Applicant's signature: _____ **Date:** _____

In order to be eligible for consideration for a 2027 grant-in-aid, this application and all requested supporting materials must be received no later than October 15th, 2026.

Please submit in person at 7030 Trans Canada Hwy or email to finance@northcowichan.ca