

## Application Part B

You can use Part B multiple times for subsequent applications.  
One application per program/project please

If you have not completed Part A, your application will be rejected.

Part A link: <https://www.surveymonkey.com/r/KXSL3BH>

### \* 1. Contact Information

Name of primary contact for  
this application

Agency Name

Contact Person's Email  
Address

Contact Person's Phone  
Number

### \* 2. What areas of the region does the program operate in?

- |   |   |
|---|---|
| <input type="checkbox"/> All of Bruce and Grey    | <input type="checkbox"/> South Bruce          |
| <input type="checkbox"/> Bruce County             | <input type="checkbox"/> Neyaashiinigmiing    |
| <input type="checkbox"/> Grey County              | <input type="checkbox"/> Saugeen First Nation |
| <input type="checkbox"/> Arran-Elderslie          | <input type="checkbox"/> Chatsworth           |
| <input type="checkbox"/> Brockton                 | <input type="checkbox"/> Georgian Bluffs      |
| <input type="checkbox"/> Huron-Kinloss            | <input type="checkbox"/> Meaford              |
| <input type="checkbox"/> Kincardine               | <input type="checkbox"/> Owen Sound           |
| <input type="checkbox"/> Northern Bruce Peninsula | <input type="checkbox"/> Southgate            |
| <input type="checkbox"/> Saugeen Shores           | <input type="checkbox"/> West Grey            |
| <input type="checkbox"/> South Bruce Peninsula    | <input type="checkbox"/> The Blue Mountains   |

### 3. Program Name (not applying organization)

### \* 4. Funding requested - number only please

\* 5. Is the United Way essentially the sole funder of this program?

Yes

No



6. What other sources of funding have you secured or requested specifically for this program?

## Program Details

\* 7. Which of the priority areas does this program fall?

- From Poverty to Possibility
- Healthy People, Strong Community
- All That Kids Can Be

8. Fill in the blanks

Example: **With this program** the United Way of Bruce Grey's Warm Feet program **will** provide a warm pair of socks **for** 750 people experiencing homelessness or precarious housing.

With this program (agency or program name)

will (goal of the program)

for (people impacted by the program)

9. Goals: List three primary goals that this program has. If someone were to ask you 'the point' of the program, this is what you'd tell them. It's the overarching result you wish to achieve.

One

Two

Three

\* 10. Target Groups: Who specifically are you seeking to support with this program, and how many people do you expect to reach – include the geographic areas that will be directly served by this program/these activities.

11. What local need is being addressed by this program?

12. Describe any local research or data that identifies this need

13. SMART Activities (Specific, Measurable, Achievable, Realistic, and Time-specific)

14. SMART Outcomes (Specific, Measurable, Achievable, Realistic, and Time-specific)

\* 15. Outputs: What specific outputs will you be performing to achieve your goals?

Activities usually relate directly to Program Outputs in that outputs are a way to measure your activities.

For example, an activity might be 'holding weekly information sessions about navigating social services,' and the associated outputs would be things like '# of people attending weekly/monthly/total', '# of sessions held'.

Output #1

Output #2

Output #3

Output #4

Output #5

Output #6

Output #7

Output #8

16. How are people with lived experience, clients or stakeholders involved in the design and delivery of this program?

## Data Collected

\* 17. If your program is food related, you will be expected to actively share data on the FoodBruceGrey app. Are you an active user at this time on FoodBruceGrey.com?

Yes

No

18. What data points will this program collect?

Data Point 1

Data Point 2

Data Point 3

Data Point 4

Data Point 5

Data Point 6

Data Point 7

Data Point 8

19. Is this a totally new program for Bruce Grey?

Yes

No

Ongoing Program

20. What year did your program start?

21. If this is an ongoing program has it identified any emerging needs or trends? Please explain

**New Program**

22. As a new program, how has this program identified any new emerging needs or trends? Please explain



## Document Uploads

### Required:

#### Program budget

#### Program plan for the funds you are requesting

\* 23. Program budget

Choose File

Choose File

No file chosen

\* 24. Program plan for the funds you are requesting

Choose File

Choose File

No file chosen