

## Application Part A

Agencies should fill this out once and only once.

Part B should be filled out for each grant request if the organization is making more than one funding request. Part B link: <https://www.surveymonkey.com/r/8MK7RZQ>

\* means an answer is required for this question

### \* 1. Contact Information

Name of primary contact for this application

Agency Name

Address

Address 2

City/Town

Province

Postal Code

Charitable Number Or Indigenous Program name

Contact Person's Email Address

Contact Person's Phone Number

### \* 2. Agency Mission Statement

### \* 3. Agency Vision Statement

\* 4. Policy and Procedure - check all that apply

Our agency has and adheres to privacy policies that meet the requirements of the relevant federal and provincial privacy legislation.

Our organization has and adheres to human resources policies and procedures.

Our organization has and adheres to diversity/inclusivity/accessibility/ equity statements.

Our organization has and adheres to anti-discrimination/anti-harassment policies/procedures.

Our organization has and adheres to volunteer policies and procedures.

\* 5. Support of United Way - check all that apply

Our agency prominently displays (or will display) the United Way of Bruce Grey member agency sign at all of its locations.

Our agency uses (or will use) the United Way member agency logo on all of its promotional and printed materials, including our annual report.

Funds received from the United Way are clearly noted (or will be noted) in our audited financial statements.

Our agency conducts an internal United Way Workplace Campaign or other fundraising activities, with participation from staff and volunteers.

We are not yet a funded agency

## Pandemic Related Information

\* 6. Did you receive any of the following funding in the past 20 months? Check all that apply.

- |  |  |
|--|--|
| <input type="checkbox"/> United Way of Bruce Grey Pandemic Relief Fund                         | <input type="checkbox"/> Other Federal Pandemic Relief Funding                             |
| <input type="checkbox"/> ECSF - Emergency Community Support Fund (UWBG or GBCF)                | <input type="checkbox"/> Other Provincial Pandemic Relief Funding                          |
| <input type="checkbox"/> SSRF - Social Services Relief Fund (Grey or Bruce County)             | <input type="checkbox"/> Other Municipal (Bruce or Grey County) Pandemic Relief Funding    |
| <input type="checkbox"/> Bruce Power or Bruce Power supplier (outside of traditional supports) | <input type="checkbox"/> Have not received additional funding through any of these sources |

## Document Uploads

### Required:

**Most recent audited financial statements**

**Current fiscal budget**

**List of Board of Directors**

### Optional

**Most recent strategic/organizational plan (if one exists).**

**Most recent annual report**

\* 7. Most recent audited financial statements

Choose File

Choose File

No file chosen

\* 8. Current fiscal budget

Choose File

Choose File

No file chosen

\* 9. List of Board of Directors

Choose File

Choose File

No file chosen