



**Township of Essa**  
**Policy # A01-19 "Community Assistance Grants"**

<b>SUBJECT:</b> Community Assistance Grants	<b>Date issued:</b> February 28, 2019	<b>Effective Date:</b> March 6, 2019	<b>Resolution No:</b> CW045-19
<b>SCOPE: STAFF, COUNCIL AND APPLICANTS</b>		<b>Revised:</b> n/a	<b>Page 1 of 2</b>

**A. PURPOSE:**

The Township of Essa's Community Assistance Grants Policy establishes eligibility requirements and outlines application requirements. The Community Assistance Grant Program is available to help support not-for-profit organizations, whose initiatives add to the quality of life for the residents of Essa Township as a whole.

**B. GRANT APPLICATION PROCESS:**

All completed applications must be submitted to the Clerk's Department, no later than January 31<sup>st</sup> of each calendar year, with all supporting documentation attached as follows;

1. Brief description of the organization, including its constitution, mission statement, or statement of purpose.
2. Purpose for which the Grant will be used.
3. Previous Years financial statement.
4. Proposed Budget for the current operating year.
5. Reporting on how previous years Grants were used.
6. List of volunteer Board of Directors/Executive (name, address and telephone number).
7. Other sources of funding the applicant has applied for or obtained.
8. Signature of signing authority (ies).

**C. ELIGIBILITY CRITERIA**

In order to be eligible for a Community Grant, applicants must meet all of the following criteria:

1. Must be a not-for-profit, or registered charitable organization; and
2. Must be operated by a volunteer base; and
3. Provide an accessible, needed and worthwhile service proven to benefit the Township of Essa residents.

**D. APPLICATION APPROVAL PROCESS:**

Upon commencement of the annual budget process each fall, the Township will provide notification to the public through its electronic media (website and twitter) as well as mailing the notice to past recipients.

1. Applications must be submitted using the prescribed form.
2. Only complete applications received on or before the deadline will be reviewed.
3. Applications will be reviewed by members of staff and recommendations for assistance will be prepared and submitted for Council approval.
4. The application process is a competitive process and there is no guarantee that any award will be granted, or that the amount requested will be awarded in full.
5. Only successful applicants will be contacted, and a cheque will be forwarded.



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Notwithstanding the eligibility and criteria above, Council may approve application requests that do not meet all criteria or are inconsistent with the requirements in this Policy, at their discretion, provided that the requested amount in the application does not exceed the annual approved Community Assistance Grant Program budget.

**Appendices:**

1. Township of Essa Grant Application.



Appendix 1  
**TOWNSHIP OF ESSA**

**GRANT APPLICATION**

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Applications for grants and donations are not automatically renewed each year; each application is reviewed based on merit each budget year.

Organizations requesting donations may be required to submit recent bank statements and/or financial statements.

Please attach a separate sheet if additional space is required to complete your application.

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**REQUESTING:** Financial Donation in the amount of \$ \_\_\_\_\_

OR Township Tax Grant – Property Roll Number: \_\_\_\_\_

**Organization Name and Address Information**

Organization Name \_\_\_\_\_

Address \_\_\_\_\_

Town \_\_\_\_\_ Postal Code \_\_\_\_\_

Contact Name \_\_\_\_\_ Telephone \_\_\_\_\_

e-mail \_\_\_\_\_ Fax \_\_\_\_\_

**Organization Information**

Number of Members \_\_\_\_\_ Essa Residents \_\_\_\_\_ Membership Fee If Applicable \_\_\_\_\_

Geographic Area Served: \_\_\_\_\_ Date Formed \_\_\_\_\_

Outline the mission, purpose and objectives of your organization.

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Purpose for which the current grant/donation would be used, if approved. Give complete details, i.e. project or event description, time frame, and community benefits relative to The Township of Essa.

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Type of Organization (i.e. Registered Charity, Non-Profit Organization, etc.) and registration number.

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Other Sources of Revenue (include all amounts that have been or will be received – other donations, grants/subsidies, private funding, etc.).

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Do you currently receive other gratuities from the Township, i.e. facility subsidization, tax reductions, fee waiver or reduction, photocopying, administrative support, etc.?

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Have you received grants/donations from the Township of Essa in the past?

Amount Requested \_\_\_\_\_ Amount Approved \_\_\_\_\_ Year(s) \_\_\_\_\_

**\*\*\*A FINANCIAL STATEMENT FOR THE PREVIOUS YEAR IS TO BE ATTACHED.\*\*\***

**Signature of Authorized Official(s)**

\_\_\_\_\_  
Name and Position

Date \_\_\_\_\_

\_\_\_\_\_  
Name and Position

Date \_\_\_\_\_

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***For Office Use Only***

Approved \_\_\_\_\_

Denied \_\_\_\_\_

Amount \$ \_\_\_\_\_

Date \_\_\_\_\_

Additional Comments:

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**Note:** Personal information contained on this form is collected pursuant to the *Municipal Freedom of Information and Protection of Privacy Act*, and will be used for the purpose of determining eligibility for grants. Questions about this collection should be directed to the Clerk/Freedom of Information Coordinator, The Corporation of the Township of Essa, 5786 County Road 21, Utopia, Ontario, L0M 1T0.