

FN-24-101 AD HOC REQUESTS

APPLICATION FORM



Directions for completing the grant application:

- Read the Ad Hoc Requests Policy No. 24-FN-101.
- Return completed applications to:
Town of Bonnyville
Bag 1006
Bonnyville, AB T9N 2J7
or by email at admin@town.bonnyville.ab.ca
- For information on completing this application visit our website at www.town.bonnyville.ab.ca
- For questions, contact the Town Administration Office at 780-826-3496 or by email at admin@town.bonnyville.ab.ca

Applicant Contact Information

Individual/Organization Information

1. Applicant Name:
2. Applicant Email:
3. Applicant Phone Number:
4. Applicant Mailing Address:

Primary Contact Person

5. Contact Person:	
6. Contact Email:	
7. Contact Phone:	8. Primary Contact Phone (Cell):
9. What is your relationship to the Applicant (parent/coach/board member)?	

Eligibility Checklist

Is the applicant:	(Yes/No)
10. Based in the Town of Bonnyville?	
11. Is the activity, program, project, service, etc. located within the Town of Bonnyville?	
12. Has the Town provided funding to you for any other activity, program, project, service, etc. in the calendar year you are requesting funding for? If Yes, please provide the details of this funding. _____ _____	

Request Details

13. What is the name of the activity, program, project, service, etc. you are requesting funding for?
14. Please provide a description of the activity, program, project, service, etc. you are requesting funding for?
15. How will this activity, program, project, service, etc. benefit the Town of Bonnyville?

Ad Hoc Requests

Application Certification

I Certify that:

1. The information contained in this application is true and accurate.
2. I am duly authorized on behalf of the applicant to submit this application, and that the applicant is in support of this application.
3. I acknowledge that the submission of an application alone does not guarantee funding, and that the provision of funding is dependent upon a review and approval process.
4. I have read the Ad Hoc Requests Policy.

Name	
Signature	
Phone Number	
Email	

Please keep a copy of this application for your records.

FOIP Statement

The personal information is collected under the authority of Section 33(c) of the *Freedom of Information and Protection of Privacy Act*, RSA 2000, c F-25, and is used for administering the Town's grant funding programs. If you have any questions regarding the collection and use of your personal information, please contact the Town's FOIP Coordinator at (780) 826-3496.