

Ministry of Tourism, Arts and Culture

Mail/Courier: Multiculturalism Branch, Ministry of Tourism, Arts and Culture, Suite 730 - 999 Canada Place, Vancouver, V6C 3E1

Email: multiculturalism@gov.bc.ca

Web: <https://www2.gov.bc.ca/gov/content/sports-culture/gambling-fundraising/gaming-grants/multiculturalism-grants>

L&G File#: (for your organization)

BEFORE YOU START

Use this form to apply for a Multiculturalism Grant within the "Cultural Expression" or the "Anti-Racism" sectors.

Note: This form is for Multiculturalism grants only.

Application Period and Sectors:

Cultural Expression Sector	Apply between November 14, 2017 and January 8, 2018
Capacity Building Sector	Final notifications will be made by March 2018

- Review the '[Guidelines – Applying for a Multiculturalism Grant](#)'. *
- Review the '[Multiculturalism Grant – Pre-Application Checklist](#)'. *
- Submit a separate application form for each sector in which you apply (see table at right). Indicate which sector you are applying in by checking the appropriate sector box in 'Section 2 – Organizational Details'.
- Use the latest version of this form when applying. *
- Items in 'Section 5 – Additional Requirements (Application Attachments)' are required to complete this application.
- Late or incomplete applications will generally be returned to the applicant without being processed.
- **Mail your application to the Multiculturalism Branch (see mail and courier address at the top of this form).**
- Do not fax your application, it will not be accepted.

* Available by request from multiculturalism@gov.bc.ca

SECTION 1 – ORGANIZATION INFORMATION

PLEASE PRINT CLEARLY

Organization name: (as it appears on the constitution and/or certificate of incorporation if applicable)		
Organization mailing address: Unit, Street, and/or PO Box	City	Postal Code
Organization physical address: (if different than above) Unit and/or Street	City	Postal Code
B.C. society number: (if the organization is a registered society in B.C.)	On what date did your organization start operating? (approximate date – DD-Mon-YYYY)	Fiscal year end: (month and day)
General program/service(s) or purpose(s) of your organization: (e.g. cultural organization, festival organizers.)		

SECTION 2 – ORGANIZATION DETAILS

Sector: (Under which of the following Multiculturalism Grant sectors are you applying? – Choose one only.)			
<input type="checkbox"/> Cultural Expression		<input type="checkbox"/> Anti-Racism	
Mission Statement: (your organization's mission statement)			
Number of eligible voting members:	Number of board members:	Date of last annual general meeting: (DD-Mon-YYYY)	Number of voting members attending the last annual general meeting:

SECTION 3 – PROGRAM FUNDING REQUEST

List the programs in this sector for which you seek grant funding and indicate the amount being requested for each program. Attach an additional sheet if more space is required. **For each program listed, Section 4 must be completed.**

Note: Total grant request cannot exceed \$5,000. Additionally, the maximum Multiculturalism Grant funding per organization is \$5,000 (keep this in mind if you have already applied for a Multiculturalism Grant in a different sector.

Program name: (list the program names for which you are seeking grant funding)	Requested amount:
	\$
	\$
	\$
	\$
Total grant request:	>>> \$

SECTION 4 – PROGRAM INFORMATION

This section must be completed for each program listed in ‘Section 3 – Program Funding Request’. If you have more than one program, print and complete this page for each.

Program name:
Describe the activities and delivery of the program: (i.e. the activities provided and how they are delivered, community benefit, accessibility, sustainability, and community support – attach an additional sheet if necessary)
What level of grant funding are you requesting for this program?
Describe in detail how the grant funds will be used: (e.g. wages, rent, etc. – attach an additional sheet if necessary)
How many people will participate in, or benefit from, this program?

SECTION 5 – ADDITIONAL REQUIREMENTS (APPLICATION ATTACHMENTS)

<input checked="" type="checkbox"/>	The following are required to complete this application: (submit all necessary documentation with this application)	
Organization information:		
<input type="checkbox"/>	Constitution and bylaws	New applicants must submit their organization's constitution and bylaws. Repeat applicants must submit changes to their organization's constitution and bylaws.
<input type="checkbox"/>	Board of directors list	Up-to-date information about the organization's board of directors must be provided; the list must include: names; addresses; phone numbers; e-mail addresses; and positions held on the board.
Program information: (for each program, in section 3 and 4, for which funding is requested, provide the following)		
<input type="checkbox"/>	Program budgets (for the current fiscal year and next fiscal year)	Program budgets for the current fiscal year and next fiscal year (for each program for which funding is requested) must be provided. The program budgets must detail confirmed and potential revenue sources and all planned expenditures. Federal or provincial government funding, including contract or grant monies, must be clearly identified.
<input type="checkbox"/>	Program revenues and expenditures (for the previous fiscal year)	Actual revenue and expenditure information for the programs from the previous fiscal year must be provided.
Financial information for the organization:		
<input type="checkbox"/>	Organization financial statements	Complete annual financial statements must be provided for the organization's previous fiscal year, including: <ul style="list-style-type: none"> • Revenue and expense statements clearly showing all sources of revenue with grant funds identified. • Balance sheet listing all assets and liabilities of the organization and with restricted funds clearly identified. This would be funding specifically designated by the funder for other projects.
<input type="checkbox"/>	Bank Account information	You must have a dedicated bank account in the name of the applicant organization in order to receive grant monies. The money for an approved grant will be transferred electronically to this account or gaming account if one exists.
<input checked="" type="checkbox"/>		Choose one of the following options:
<input type="checkbox"/>		Bank Account information is on file with the Community Gaming Grants Branch and there are no changes.
<input type="checkbox"/>		I will include a copy of a void cheque from the Bank Account with this application.

SECTION 6 – CERTIFICATION

My acceptance of this statement indicates that I confirm and acknowledge:

- I am a bona fide member of the organization (the “applicant”) making this application, and my position, title or role within it is as indicated herein.
- I am authorized to complete and submit this application by and on behalf of the applicant.
- I confirm personally and on behalf of the applicant that all facts stated and information furnished in this application are complete and true.
- The applicant undertakes to comply with all provisions of the Legislation and Policies governing this grant program.
- The applicant undertakes to comply with all conditions, guidelines, rules and policies published by the Minister of State for Multiculturalism, whether published or issued before or after the date of this application.
- Upon dissolution of this organization, all unused grant funds and assets purchased with grant funds will be transferred to the Minister of Finance, or if those assets are not in a form that can be easily transferred to the Minister of Finance, then to another eligible organization within British Columbia.
- The applicant understands and confirms that any information submitted herein may be disclosed by Province of BC publicly, in compliance with the Freedom of Information and Protection of Privacy Act.

Two board members of the organization (officers) who are responsible for the application: (both must sign this form)				
1	Position: (with the organization)	First name:	Last name:	
	Address: Unit and Street	City	Province	Postal Code
	Business phone number: (XXX) XXX-XXXX	Ext:	Home phone number: (XXX) XXX-XXXX	Cell phone number: (XXX) XXX-XXXX
	E-mail address: (provide a valid e-mail address)	Signature: X		Date signed: (DD-Mon-YYYY)
2	Position: (with the organization)	First name:	Last name:	
	Address: Unit and Street	City	Province	Postal Code
	Business phone number: (XXX) XXX-XXXX	Ext:	Home phone number: (XXX) XXX-XXXX	Cell phone number: (XXX) XXX-XXXX
	E-mail address: (provide a valid e-mail address)	Signature: X		Date signed: (DD-Mon-YYYY)
Submitter: (the submitter must be one of the people above, include their name below)				
3	First name:	Last name:		
	Contact Person: (the contact person must be one of the people above, include their name below, may be the same person as the submitter)			
4	First name:	Last name:		

SECTION 7 – DELIVERY METHOD

Application results will be sent by e-mail.

<p>E-mail (provide <u>one</u> valid e-mail address in the space at right for notification purposes; <u>multiple addresses not accepted</u>)</p> <p>NOTE: Ensure that your e-mail account and/or client is set up to allow messages that are sent from the following e-mail addresses: gamingonlineservice@gov.bc.ca and communitygaminggrants@gov.bc.ca</p>	
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The information requested on this form is collected under the authority of the Multiculturalism Branch pursuant to the Gaming Control Act. The information provided will be used to assess your eligibility for a Multiculturalism Grant. Questions may be directed to the Multiculturalism Branch, Vancouver.