

Tom Yates

Referred from  
June 30, 2021  
Board meeting

**Subject:** FW: amended Grant-in-Aid application  
**Attachments:** June amended SRDGrant-in-Aid-Form-Fillable.pdf

**From:** Jennifer Pass <[passj@telus.net](mailto:passj@telus.net)>  
**Date:** June 11, 2021 at 3:42:01 PM PDT  
**To:** Brad Unger <[bunger@srd.ca](mailto:bunger@srd.ca)>  
**Subject:** amended Grant-in-Aid application

**NOTICE:** This email is from an external source.

Mr. Brad Unger,  
Board Chair,  
Board of Directors,  
Strathcona Regional District,

Dear Mr. Unger,

**RE: Grant-in-Aid : amended application: Access study of Strathcona Park**

I am writing on behalf of Friends of Strathcona Park. We submitted a Grant-in-Aid application in March, 2021. Since then we have received some support from CVRD, which has focussed our directions for this year. We also are anticipating a letter of support from CVRD, and are planning to apply for support to ICETrust, as the study we are embarking on will be of benefit to all the Vancouver Island Communities surrounding the Park. We would very much appreciate a letter in support of this project from the Strathcona Regional Board.

The specific support from CVRD is three days of work (with a truck) for two students. These are their summer parks students. We will be using these students for three days of questioning of park users embarking on trips, and would appreciate the equivalent time which will allow us to do "exit surveys" of park users in the busiest times of the summer.

I attach the amended application, without original attachments, as the information attached to our March application has not changed. If you wish those re-sent, please let me know. We have applied to present at the June 16th Strathcona RD Board meeting, but unfortunately there was insufficient time.

If you or other board members have any questions, please don't hesitate to email or call (250) 334-2321.

Yours Sincerely,  
Jennifer Pass,

Chair of, and on behalf of FOSP



#301 – 990 Cedar Street, Campbell River, BC V9W 7Z8  
Tel: 250-830-6700 Fax: 250-830-6710  
Toll Free: 1-877-830-2990  
[www.srd.ca](http://www.srd.ca)

## GRANT IN AID FORM

### ELIGIBILITY

Any non-profit community organization, to which the giving of a GIA will benefit the general community. Grants shall be considered on a year-to-year basis and continuing support should not be anticipated.

### APPLICATION

***The form, application for grant-in-aid, should be completed in full and all community organizations are encouraged to submit the form. In addition, the following information is useful, but is not mandatory:***

- Copy of current year-to-date and the immediately preceding year's financial statements;
- Budget for the year in which the grant is being requested for;
- If available, the most recent annual report.

Forward the application form and supporting documentation to the attention of the appropriate electoral area director at the regional district office.

Grant-in-aid requests are usually considered by the board of directors in February of each year in conjunction with the establishment of the current year's budget.

### THE PROCESS

The electoral area director responsible for the area, from which the grant-in-aid is being requested, shall review each request and provide direction to the secretary of the regional board as to the resolution endorsed.

All requests for grants-in-aid must be approved by resolution of the regional district board.

***All organizations requesting a grant-in-aid shall receive a letter acknowledging the request and advising of the resolution passed.***

### CRITERIA

- The grant-in-aid is within the current year's budgeted allocation;
- The grant does not subsidize activities that are the responsibility of senior governments, as this would represent a downloading of senior government costs to local taxpayers;
- Grants should not be made to other local governments, i.e.: municipalities.
- Grants should not be used to augment tax funded functions, i.e.: volunteer fire departments, community halls, etc when the grant request is for a service or item that is included in the establishment bylaw for that specific local service area;
- GIAs must not be provided to an "industrial, commercial or business undertaking";

- A demonstrated need for the service/project within the community and the financial need of the organization;

**RELEASE OF FUNDS**

As annual funding through taxation is not received from the Province of BC's Surveyor of Taxes until August 1<sup>st</sup> each year, the release of grant approvals to local community organizations shall be as follows:

The finance department after August 1st shall issue payments of a grant-in-aid, unless the resolution approving the grant-in-aid includes a request for immediate payment.

**ANY REQUESTED INFORMATION IS USEFUL, BUT IS NOT MANDATORY**

**THIS PROCESS IS TO BE USED AT THE DISCRETION OF THE ELECTORAL AREA DIRECTORS**



#301 – 990 Cedar Street, Campbell River, BC V9W 7Z8  
Tel: 250-830-6700 Fax: 250-830-6710  
Toll Free: 1-877-830-2990  
[www.srd.ca](http://www.srd.ca)

## APPLICATION FORM GRANT-IN-AID

DATE: \_\_\_\_\_

1. Name of Organization: \_\_\_\_\_

Society # (if applicable) \_\_\_\_\_ Email Address: \_\_\_\_\_

2. Contact Person: \_\_\_\_\_ Position: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Postal Code \_\_\_\_\_ Telephone No: \_\_\_\_\_

3. Purpose of Organization: \_\_\_\_\_

4. If applicable, does your organization own any facilities/property?

( ) YES ( ) NO

If yes, please give the legal description of the property:

\_\_\_\_\_

5. Executives of Your Organization:

President/Chairperson: \_\_\_\_\_

Vice President/Vice Chairperson: \_\_\_\_\_

Treasurer: \_\_\_\_\_

6. Current Membership: \_\_\_\_\_ # of Meetings per year: \_\_\_\_\_

7. Please describe the programs and activities that your organization sponsored in the last year (with dates):

(i) \_\_\_\_\_

(ii) \_\_\_\_\_

(iii) \_\_\_\_\_

(iv) \_\_\_\_\_

(v) \_\_\_\_\_

(vi) \_\_\_\_\_

8. Has your organization received any of the following in the past?

	NO	YES				
grant-in-aid			Amount	\$ _____	Year	Purpose _____
permissive tax exemption			Amount	\$ _____	Year	Purpose _____
waiver/ reduction of fees and charges			Amount	\$ _____	Year	Purpose _____

**INFORMATION REQUIRED ABOUT THE REQUESTED GRANT**

1. Total Grant-In-Aid Amount Requested from the regional district: \$ \_\_\_\_\_

2. Describe how the Grant-In-Aid will benefit the community:  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Project Start Date: \_\_\_\_\_ End Date: \_\_\_\_\_

3. Will the Project be available to the community at large? (\_\_\_\_) YES (\_\_\_\_) NO

4. **Please include with your application, copies of the following:**

- (a) Year to date and the immediately preceding years' financial statements;
- (b) Budget for the year in which the grant is being requested;
- (c) If available, the most recent annual report.

**IF YOU HAVE ANY QUESTIONS ABOUT THE INFORMATION REQUIRED, PLEASE TELEPHONE 250-830-6700.**

\_\_\_\_\_  
**Signature of Applicant**

\_\_\_\_\_  
**Date**

Office Use Only:

Amount Approved: \$ \_\_\_\_\_

Date: \_\_\_\_\_

GL Code: \_\_\_\_\_