



Beautiful Plains Community Foundation Inc.

P.O. Box 486, 487 Walker Avenue

Neepawa, MB R0J 1H0

Phone: 204-476-2681

Email: info@beautifulplainscf.ca

GRANT APPLICATION GUIDELINES

The Mission Statement of the Beautiful Plains Community Foundation Inc. is:

To preserve and advance the quality of life in the Community by developing permanent endowment funds, making responsible grants and acting as a catalyst for Community philanthropy and leadership.

The “**Community**” encompasses the Town of Neepawa, Rural Municipality of Rosedale, Municipality of Glenella-Lansdowne and the Langford portion of the Municipality of North Cypress-Langford. Should your grant request not primarily serve the listed “**Community**” above the grant application will not be considered.

To accomplish the Foundation’s mission effectively and efficiently, a thorough review process for grant applications has been created.

Follow the **granting guidelines** listed below when completing BPCF application form

- Organizations must demonstrate fiscal responsibility.
- Applications must establish that there is a need for their project.
- A grant is awarded for a defined purpose and for a project covering a specific period.
- The BPCF encourages the participation of other funders, and, on occasion, provides matching or challenge grants to stimulate participation from other sources.
- Preference is given to projects which:
 - Benefit the entire region of the Beautiful Plains Community Foundation “Community” as defined above.
 - Demonstrate innovation in solving challenges faced by your community
 - Promote cooperation and sharing of your organization
 - Benefit multiple generations
 - Have secured funding from other sources
 - Provide long term benefits to the Beautiful Plains Community Foundation “Community”
- Grants are not made to or for:
 - Individuals
 - Annual fundraising initiatives
 - Annual requests for operating funding
 - Establish or add to endowment funds
 - Political activities
 - Direct religious’ activities
- Grant recipients are required to complete a grant report showing accountability for the use of the funds within one year. Failure to complete this report may result in denial of future grant applications.
- Applications submitted after the grant deadline of 5:00 PM CDT on March 31st will not be considered.
- **Only applications which are completed in full and those submitted by in person or email will be considered. Handwritten applications will no longer be accepted.**
- If you have any questions about the guidelines listed above, please contact info@beautifulplainscf.ca or 204-476-2681



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GRANT APPLICATION

Granting is done annually. Grant applications are accepted from:

February 1 to March 31

Decision made by: May 1

**Applications submitted must be received by the Beautiful Plains Community Foundation
no later than 5:00PM on March 31.**

**NOTE: Late or incomplete applications will not be considered for funding.
Applications which are handwritten will not be considered for funding.**

Please DROP OFF or EMAIL completed applications with required attachments to:

**Beautiful Plains Community Foundation, 487 Walker Avenue, Neepawa, MB R0J 1H0
info@beautifulplainscf.ca**

Required Attachments to be Included:

___ Your organizations total budget for the current fiscal year

___ Your organizations total budget for the last fiscal year

___ Budget for proposed project (and quotes, if applicable)

Applicant Organization Information:

Name of Organization: _____

Primary Contact: _____ Position: _____

Telephone: _____ Email: _____

Organization Address: _____

Year Established: _____ Website: _____

Number of Employees: Full-Time: _____ Part-Time: _____ Volunteers: _____

List of board members, executive and officers:

Which best describes your organization:

- ☐ Non-qualified donee (grassroots not for profit organization, resident-led community group, registered non-profit without charitable status)
- ☐ Qualified donee (Registered Charity, Registered Canadian Municipality)
Qualified Donees include charitable registration # _____ RR0001

Please indicate the name BPCF should write a cheque to, should your organization be awarded a grant: _____

If you have received a grant from the Beautiful Plains Community Foundation in the past, are your grant report forms up to date?

☐ Yes ☐ No

What is the purpose of your organization?

What is the geographic area served by your organization? Select all that apply.

- ☐ Town of Neepawa
- ☐ Municipality of Glenella-Lansdowne
- ☐ Rural Municipality of Rosedale
- ☐ Langford Portion of the Municipality of North Cypress-Langford

Who utilizes your organizations services? (demographics) Select all that apply.

- ☐ Toddler (0-4)
- ☐ Youth (5-18)
- ☐ Young Adult (18-35)
- ☐ Adult (36-65)
- ☐ Senior (66 & up)

How many people does your organization serve? Select one answer.

☐ Up to 10

☐ Up to 50

☐ Up to 100

☐ Up to 500

☐ Over 500

How are your organizations operations funded? Select all that apply.

☐ Programming

☐ Donations

☐ Fundraisers

☐ Grants

☐ Other: _____

Grant Request Information:

Name of Project: _____

Project Description:

What are the goals and objectives of the project?

Indicate how you will measure success of the project in relation to its goals and objectives?

What long term benefits does this project bring to your organizations and/or the "Community"?

How will members of your organization, local businesses, members of the community and other community organizations be part of the development and implementation of the project?

Do you have the required building permits, engineered drawings and consultations required to complete this project?

☐ Yes ☐ No ☐ Not Applicable

If awarded a grant, how will your organization recognize BPCF?

Total Cost of Project \$ _____ Amount Requested \$ _____

Project Start Date: _____ Project Completion Date: _____

Other Sources of Funding:

Received From	Amount	Confirmed	
		Yes	No
_____	\$ _____		
_____	\$ _____		
_____	\$ _____		
_____	\$ _____		
_____	\$ _____		
_____	\$ _____		

Partial Funding:

Would your organization be able to continue the initiative if you were to receive only partial funding in support of your request?

___ No

___ Yes, please elaborate:

Grant Application Submission Agreement:

___ I understand that applications which are submitted without all required information and attachments will not be considered for funding.

___ I understand that this application will be reviewed by the Beautiful Plains Community Foundation Inc. Grant Committee, and that submission of this application does not guarantee funding.

___ I understand that my organization will be notified of the results of this application at the email address I provide.

___ I understand that if this project is selected for funding, my organization will be required to complete the BPCF Grant Report within one year of receiving funding.

___ I understand that if awarded a grant, the payment will be made to the organization name listed on this application.

___ I understand that our organization must provide project updates, as requested by Beautiful Plains Community Foundation.

Applicant Signature: _____ Date: _____