



Central Coast Regional District

Grant Writer Support Program

Request for Assistance Form

Please complete the form with as much detail as possible and return to the CCRD office at 626 Cliff Street, Bella Coola or email grantwriter@ccrd.ca and we will contact you shortly.

Have read the '[Preparing to Work with a Grant Writer](#)' criteria

Date: _____

Part A: Applicant Information

Organizations Name: _____

Applicant Type: Not-for-Profit Organization Registered Charity
 Indigenous Organization Faith Based Organization
 School and School Boards Community Group
 Other

Brief description of the purpose/mandate of your organization:

Address: _____

Contact Name: _____

Position: _____ Website/Social Media: _____

Phone: _____ Email: _____

Area(s) of Interest:

Arts & Culture Environment Community Safety & Awareness
 Education Seniors Health & Wellness
 Sports & Rec Child & Youth Other

Assistance Requested:

Identification of Funding Sources Reviewing Proposal
 Developing a Project Plan Writing Grant Application

Is there a specific funding opportunity your organization is currently interested in?

Yes No

If yes, please specify: _____

Part B: Project Information

Provide a brief description of your project(s):

Please provide an estimated cost for your project(s):

Any other sources of funding? (Government, Trust, In-Kind etc.)

Part C: Supporting Documents

Please indicate which supporting documents your organization has:

Recent Annual Financial Statements Yes No

Board of Directors/Council List Yes No

Certificate of Incorporation Yes No

Letters of Support Yes No

Letters of Confirmation Yes No

Budget Yes No

Quotes/Cost Estimates Yes No

Board/Council Resolution Yes No

Other: