



# "Indigenization, Inclusion, Diversity, Equity & Accessibility Program Development"

Completed City of Kingston Heritage Fund (CKHF) PROJECT GRANT APPLICATIONS are due at the KAM Office by 3:00 PM on:

# TUESDAY, SEPTEMBER 19th, 2023

#### **Contact Information:**

Jamie McKenzie-Naish CKHF Grant Review Officer Kingston & Area Association of Museums, Art Galleries and Historic Sites. 837 Princess St. Suite 302 Kingston, ON K7L 1G8

(613) 507-4014 info@kingstonmuseums.ca

#### https://www.kingstonmuseums.ca/ckhf

Check boxes below to ensure that your application package is complete.		
	<b>Obtain required signatures.</b> <i>In the event of a collaborative application, complete a copy of</i> section <i>A</i> – Applicant Information and Declaration <i>for <u>each</u> partner.</i>	
	<b>Letters of Support from All collaborative partners involved in project.</b> Letters should detail the role and responsibilities of each partner within the project.	
	<b>Financial Documentation:</b> attach a copy of your previous year's Financial Statement (Please note: If you are also applying for another CKHF grant, you do not have to resubmit your financials again)	

### 1. DECLARATION

We the undersigned certify that:

- the information contained in this application and the accompanying documents is true, accurate and complete;
- we have full rights and financial control over the project for which we are requesting funding;
- if there are significant changes to the project, or if we fail to carry the project through to completion, we understand that we may be required to return the CKHF grant to KAM; and
- consent is given for the release of information in this application and any subsequent reports submitted, to the KAM CKHF Grants Review Committee, Board of Directors of KAM, and the Corporation of the City of Kingston;
- we have read and agree to all of the terms and conditions of the Administrative Plan *City of Kingston Heritage Fund 2023-2024*, including but not limited to:
  - CKHF will not reimburse any expenses incurred prior to January 1, 2024;
  - CKHF grant funds must be spent prior to Dec. 31, 2024, or be repaid;
  - CKHF grants may only be used for the purposes outlined in the application. Changes in scale, activities and timeframe must be reported promptly to the Grant Review Officer, and approved before proceeding;
  - a CKHF Grant Interim Report must be submitted by July 15<sup>th</sup> 2024;
  - a CKHF Grant Final Report muse be submitted by March 15, 2025;
  - KAM and the City of Kingston reserve the right to place conditions on the release of CKHF grants. Any such conditions will be communicated to the applicant in their letter of notification;
  - as a recipient of public funds, successful applicants are required to maintain full and complete records regarding the receipt and disbursement of funds received;
  - Organizations receiving CKHF grants are required to recognize the City of Kingston and KAM's contribution in promotional literature and material developed for the funded project. Copies of corporate logos and guidelines for their use will be provided to successful applicants, for this purpose;
  - KAM reserves the right to use the project in future promotion of grant; and
  - All complaints and concerns regarding the CKHF application, review, adjudication, and awards process, are to be made in writing to the Chair, CKHF Grants Review Committee c/o the KAM Office.

Signing Office	er:	Date:
Name, Position		
Signature		
Signing Officer:		Date:
Name, Position		
Signature		

2. ORGANIZATIONAL SUMMARY					
Common Name of Applicant Organization:					
Legal Name:					
Address:					
Mailing Address: (if different from above)					
Are you the Sponsoring Partner? (see definition in CKHF Admin Plan 2023- 2024)			Yes		Νο
If yes, please tell us the name of the partner you are sponsoring:					
Address/location where the majority of project activities occur:					
Website:					
Name of Conta	act Person:				
Title/Position:					
Telephone:			Email:		
Registered Charitable Number OR Incorporation Number:					
Is your organization currently in receipt of City of Kingston grant funding, not including the Heritage Fund?			□ Yes □ No		
Are you applying to another CKHF					Large Operating
			IF		Small Operating
grant in 2023-2024?			Community Cultural Heritage Project		
			No (please also complete section 11 & 12)		

#### Cultural Heritage Development Project Grant 2023-2024

3. PROJECT INFORMATION					
Project Title:					
Start Date:	Completion Date:				
Thematic Focus:	<ul> <li>Indigenous</li> <li>Equity, Diversity &amp; Inclusion</li> <li>Accessibility</li> </ul>				
Brief Description of Project: (max 50 words)					
Funding Requested:	Total project cost:				

# 4. PROJECT RATIONALE

Please describe the rationale for this project in relation to CKHF program objectives (3 minimum).

# 5. PROJECT OBJECTIVES

Please describe YOUR individual organizational objectives associated with this project.

250 words Max

# 6. TARGET AUDIENCE

Please describe the target audience and how this project will benefit them.

# 7. PROJECT WORK PLAN

Please describe the proposed project work plan, with timeline and critical milestones. Indicate all key activities and human resources required for project success.

# 8. CONTINGENCY PLANNING

i. Please describe how your project will move forward if you do not receive your total requested amount of funding from the CKHF.

200 words Max

### 9. EVALUATION

How will you measure the success or impact of your project?

# 10. PROJECT BUDGET

**Please complete all sections and include any required attachments**. Retroactive funding for costs incurred prior to application submission are not permitted.

Volunteer labour may be calculated at \$16.55 per hour (Ontario minimum wage effective 01 October 2023).

#### **PROJECT REVENUE**

	Item/description (as applicable)	Amount			
Requested of the City of Kingston Heritage Fund (CKHF):					
Private donations:					
Corporate donations:					
Foundation donations:					
Government:					
Other (name fund source)					
Other (name fund source)					
In-kind donations: (in-kind labou what materials and from whom/where)	r from whom/where/number of anticipated hours; wha	t equipment and from whom/where;			
Labour donated in-kind*					
Labour donated in-kind*					
Equipment donated in-kind					
Equipment donated in-kind					
Materials donated in-kind					
Materials donated in-kind					
	Total In-Kind				
Other (name source)					
Other					
	TOTAL REVENUE				
PROJECT EXPENSES					
Provider (quote/estimate)**	Item/description	Amount			
Continue on next page					

# Cultural Heritage Development Project Grant 2023-2024

PROJECT EXPENSES				
Provider (quote/estimate)**	Item/description	Amount		
In-Kind expenses (CARRY	OVER THE Total In-Kind revenue)			
	TOTAL EXPENSES			
NOTE: Total Project Revenue m	ust equal or exceed Total Expense			

# Addendum

If you <u>HAVE NOT applied for another CKHF grant</u> for the 2023-2024 cycle, you <u>are required</u> to complete section 11 and 12.

If you <u>HAVE applied to another CKHF grant</u> for the 2023-2024 cycle, section 11 and section 12 is <u>optional</u>.

## 11. ADDITIONAL INFORMATION

Please tell us about your organization. List the project-related qualifications and/or experience of the proposed project staff (paid or volunteer).

200 words Max

# 12. FINANCIAL STATEMENTS

Please submit a copy of your last year's financial statements. See Cultural Heritage Development Project Grant guidelines for further information.