

## CITY OF THOROLD POLICY AND PROCEDURE MANUAL

<b>COUNCIL</b>		
POLICY NO: 100 – 08	RECREATION, ARTS AND CULTURE GRANTS TO INDIVIDUALS AND VOLUNTEER ORGANIZATIONS	Page 1 of 11
REVISED: Jan 14, 2014		

### **AUTHORITY**

Section 107 (1) of the Municipal Act, 2001 provides:

***“General power to make grants***

*Despite any provision of this or any other Act relating to the giving of grants or aid by a municipality, subject to section 106, a municipality may make grants, on such terms as to security and otherwise as the council considers appropriate, to any person, group or body, including a fund, within or outside the boundaries of the municipality for any purpose that council considers to be in the interests of the municipality.”*

The City is allowed to pass by-laws and set its own policy and priorities in response to local need, subject to Section 107 (1) of the Municipal Act, 2001 and other acts. Discretionary grants made under this authority shall be made in concert with the accompanying components of the Grants to Volunteer Organizations Policy.

### **PURPOSE**

The City of Thorold is aware that various groups within the community promote and improve upon the recreational, arts, and cultural well-being of the community. In the course of annual budget deliberation and subject to budget constraints, Council may approve discretionary grants to support and assist community based groups that will be of a direct or indirect benefit to the citizenry of the City of Thorold, based on consideration of the terms and considerations of this Policy.

This policy provides for two types of grants: a direct grant of funding and an “in-kind” contribution grant. “In-kind” grants include the contribution of municipal equipment and/or human resources. The financial value of in-kind service requested by applicants will be identified by the relevant municipal departments and submitted to the Recreation Coordinator prior to the applications evaluation process. The Municipality will consider the financial value of the in-kind services during the application evaluation process.

## **GOALS AND OBJECTIVES**

The goal of the grant program is to improve the quality of life and well-being of the residents of Thorold in Council's estimation by:

- Addressing identified recreational, arts, and cultural needs in the community.
- Supporting the provision of new or innovative recreational, arts, and cultural services to residents, and thereby increasing the diversity of services.
- Providing financial assistance to service providers where adequate funding for the proposed service is not available from other sources.
- Assisting with one-time special requests for assistance associated with other not easily classified needs and services, including those related to disasters or other unforeseen circumstances (to be considered by Council on the merit of each request)

### I. Eligibility Criteria

All groups seeking grants must:

#### (i) Location

- Be physically located within The Regional Municipality of Niagara and provide services relating to residents of the City of Thorold.
- The majority of the group's members, registrants, and/or participants reside in the City of Thorold.

#### (ii) Legal Entity

- Be a not-for-profit organization.
- Be incorporated and/or registered under the Canada Income Tax Act for the purpose of receiving charitable donations. (This criterion may be waived at Council's discretion only, depending on the groups and on the nature of the services offered being complementary to the philosophy and priorities of Council.)

#### (iii) Organization

- Should have a formal administrative structure adequate in its numbers, be responsible for the overall management of the group's resources, be responsible for the administration of its funds and should preferably have a Board of Directors that would be representative of the community it serves.

(iv) Financial Feasibility

- Provide audited financial statements, if available, for the previous fiscal year, and current year budget statements. Other pertinent financial information may be required by Council.
- It is important to present budgets and financial statements with revenues and expenditures grouped by each individual activity, service or program rendered by the applicant organization. This may be requested by Council, at its discretion.

(v) Inclusiveness

- The applicant's proposed services should be extended to all members of the general public in the City of Thorold and should not exclude anyone by reason of race, religion or ethnic background.
- The community service programs proposed by volunteer organizations should be separate and distinct from any other activities of the group.

(vi) Groups or Types of Support That Are Not Eligible for a Grant

The following are **not** eligible for funding:

- For-profit organizations.
- Funding shortfalls resulting from programs or services of any kind that were commenced without prior consultation with the City.
- The City will **not** consider funding cumulative deficits for any groups (i.e. discretionary grants and hence financial assistance should be based on budgeted revenues and expenditures in the year for which assistance is being requested).
- Groups that have failed to comply with the reporting requirement from any previous municipal grant.
- Group's outstanding operating deficits.
- Applications for retroactive funding.
- Sports, cultural and recreational travel grants. Groups may apply for this type of assistance through the "Sports, Culture and Recreational Travel Grants Policy" (Policy # 100-27).

- Capital expenditures.

(vii) Other Provisions and Considerations

The following provisions and considerations must also be noted:

- The City will not ordinarily fund in excess of 35% of the operating budget of any service, unless Council determines a higher percentage is warranted based on a review of individual circumstances. Council may reduce its level of funding over time to encourage groups to seek alternative sources of funding.
- All groups seeking grants must complete the appropriate application form in full. **Incomplete applications will not be considered.**
- The application form must be signed by a designated officer or official of the group.
- All groups seeking grants must submit their application, in full, to the Recreation Coordinator no later than the last Friday in the month of November of the previous year in which consideration for financial assistance is required. **Late applications will not be considered.**
- All groups seeking grants must demonstrate that they have and/or will be actively seeking other sources of financial support.
- All groups seeking grants must adhere to responsible fundraising practices as determined by Council.
- All groups seeking grants must disclose any accounts payable to the City of Thorold. Amounts up to the entire amount owed to the City will be appropriated from any financial assistance granted in order to discharge its obligation to the City.
- All groups seeking grants acting in the capacity of funding organizations will not be deemed to be a distinct entity, and will be considered together for the purposes of funding.
- Granting of assistance in any one year by Council is not to be regarded as a commitment of the City of Thorold to continue such financial assistance in future years.

- The provision of grants will be made annually as funds are available and within budgetary limits and priorities as determined by Council.
- Council is not obligated to allocate funds to any group.
- No financial donations or grants will be considered unless specifically authorized by this Policy.
- In making grants the Municipality may impose such conditions as it deems fit.
- Any un-claimed funds remaining for groups shall be carried forward for six months, at which point the funds will become part of the general Community Grant Allotment.
- Any groups that generate surplus revenue through the service for which they sought a grant **must** re-pay the Municipality the total amount of the surplus up to the total amount of the grant.

## II. Assessment Criteria

A committee of staff, through the General Committee will use the following assessment criteria in evaluating the discretionary grant applications.

A scoring system will be applied to each evaluation criteria. The scoring system is a ranking from “0 to 5”, where “0” is the lowest score (does not meet the criterion at all) and “5” is the highest score (meets the criterion fully). The scores for the criteria will be totaled and priority will be given to those applicants with the highest scores.

### (i) Community Benefit

- The services address a community need.
- The services are new and innovative, rather than duplicating existing services.
- The services provide recreational, arts, and cultural benefits to the community.
- The service is complementary to Council’s policies, positions, and priorities.
- The majority of the users of the service provided must be residents of the City.
- The benefits of the program/service must accrue to City residents.
- The services are open to all residents of Thorold regardless of race, religion, ethnic background, or ability/disability.

(ii) Accountability

- The group must have a governing body or Board of Directors with an identifiable organizational structure and signing authorities.
- The group must have an identifiable and accountable system of financial controls and decision making authority.

(iii) Duplication

- Preference will be given to services that are not adequately provided for by other funding services.
- The services must not duplicate or unnecessarily overlap the services provided by other existing groups in the City. Where duplication exists, the applicant must demonstrate linkages with those existing groups in the City in order to provide continuity of service and reduce duplication.
- The service must not be one, which by its nature, could be adequately performed by the private sector, City departments, or by Regional, Provincial or Federal governments.

(iv) Goals and Objectives of the Service

- The applicant must have a clearly defined set of goals and objectives for the service for which City funding is being sought.
- The applicant identifies the “outcomes” or the impact of the service to service users and the community.
- The application should specify how these goals and objectives will be achieved.
- The applicant identifies and describes the mechanism in place to measure how actual results of the service compare to the goals and objectives as stated in the application.

(v) Financial Viability

- The applicant has provided evidence of a clear mandate.
- The applicant has a solid leadership structure and consistent management in a professional competent manner.
- The applicant has a solid infrastructure including staff and volunteers.
- The applicant has demonstrated, through audited financial statements and budgets, financial stability and accountability.
- The applicant has reasonable financial goals.

(vi) Demonstrated Need

- The applicant has demonstrated the need for financial assistance from the City.

III. The Grant Process

The following describes the steps involved in the grant process.

- (i) Council establishes funding for “Grants to Volunteer Organizations” during budget deliberations.
- (ii) Notice shall be provided to the community of the availability of the current applicable year’s grant program. Notice of the grant program, the associated policy and application forms shall be provided on the City’s website and in local media. The Municipality will **not** distribute notices directly to groups.
- (iii) The Policy and application forms will be provided on the City’s website in a format to allow for downloading. Groups will be given a minimum of 30 days to complete and submit the application forms to the Recreation Coordinator. The deadline for submissions will be the last Friday in the month of November.
- (iv) The completed application forms will be reviewed by a committee of staff, which shall prepare a recommended allocation of the budgeted amount. Should the total allocation be less than the budgeted amount at the end of the year, the surplus shall be carried forward to the following year’s budget for the “Grants to Volunteer Organizations”.
- (v) A report outlining the recommendations of the committee of staff shall be forwarded to the General Committee for consideration and approval of Council.
- (vi) A letter of notification will be distributed by mail by the City’s Recreation Coordinator to each applicant as to the result of their application.
- (vii) The decision of Council is final, with no appeals considered.
- (viii) Groups will receive their grant in accordance with the disbursement schedule noted below.
- (ix) Successful grant applicants who receive a grant amount greater than \$500 will prepare and submit a Final Report to the City **within 30 days** of the completion of the delivery of their service. Groups will **not** be considered for potential future municipal grants through this program unless they complete the Final Report to the satisfaction of Council.

IV. Community Grants Staff Committee

The Community Grants Staff Committee is comprised of four municipal staff representatives; the Chief Administrative Officer, the Director of Finance, the Operations Director and the Recreation Coordinator. The staff committee:

- Reviews the grant applications to ensure their requests meet the criteria of the policy.
- Identifies any errors or omissions in the applications and requests clarification from staff.
- Evaluates the applications using the criteria contained in this policy.
- Determines the amount of funding allocated to each successful application.
- Forwards their recommendations to the General Committee for consideration and approval of Council.

V. Disbursement of Approved Discretionary Grants

An official signing officer, on behalf of the organization, must acknowledge responsibility for discretionary grants approved by Council, by returning the completed form in Appendix 1 – Acknowledgement of Responsibility for Recreation, Arts and Culture Grants to Volunteer Individuals and Organizations (page 11). Approved discretionary grants will not be disbursed until this form has been completed and returned to the Treasurer.

If the approved grants are:

- (i) Less than or equal to \$500, 100% of the grant is payable no later than two weeks after Council approval of the grant allotments.
- (ii) Greater than \$500, 50% is payable no later than two weeks after Council approval of the grant allotments; and 50% payable by the completion of the season/event, and **only upon receipt of the written Final Report from the organization.**

VI. Accountability

Applicants awarded a grant will be held accountable for the expenditure of the funds in accordance with their stated plans. Eligibility for grants in future years will be reviewed based upon the past demonstrated fiscal responsibility of the applicant.

Funds granted under this policy are not transferable between projects or groups and must be used for the specific purposes as stated in their application.

Successful applicants must provide a Final Report upon completion of their City funded service regarding the outcome of their service. The submission of this information is required **before** the second half of the grant will be paid out, and before the group will be considered for any further grants in the future. It should be noted that any un-claimed funds remaining for Community Groups shall be carried forward for six months only, at which point the funds will become part of the general Community Grants Allotment.

#### VII. Grant Policy Administration Considerations

This policy will be reviewed at the direction of Council and/or the Community Grants Staff Committee.

It is recognized that all previous policies specifically related to discretionary grants, previously adopted by Council, that are inconsistent with this policy, be rescinded.

#### VIII. Ethical Guidelines

The Municipality adheres to the following ethical guidelines:

(i) *Conflict of Interest*

All municipal staff and members of Council who participate in the City of Thorold municipal grant program are expected to abstain from debate or voting when personal or professional involvement or association could result in a conflict of interest.

(ii) *Lobbying*

The Mayor, staff of the Mayor's Office, the Chief Administrative Officer (CAO), Councillors, and other relevant municipal staff follow ethical guidelines with regard to lobbying by community groups. Requests, application forms, and correspondence sent to these parties are forwarded to the Recreation Coordinator. There is no interference in the review process. Staff and elected representatives are expected to abide by the conflict of interest guidelines and follow approved procedures.

(iii) *Gifts, Samples and Sponsorship*

All municipal staff and members of Council who participate in the City of Thorold municipal grant program do not accept gifts from applicants (e.g. free tickets to performances or events).

(iv) *Municipal Freedom of Information and Protection of Privacy Act (MFIPPA)*

The Municipal Freedom of Information and Protection of Privacy Act (MFIPPA) contain provisions to protect the privacy of individual citizens. The intent of the legislation is to

control the collection, use and disclosure of personal information. Where a grant application includes personal information such material shall not be available to other parties without the written consent of the party named therein. Applicants and the general public have the right to request any record in the custody or control of the City of Thorold. Requests for information under this act must be directed to the MFIPPA Coordinator in City Clerk's Department.

**Appendix 1 – Acknowledgement of Responsibility for Recreation, Arts and Culture Grants to Individuals and Volunteer Organizations**

Having received approval of the request for financial assistance from the Council of The Corporation of the City of Thorold, the individual or organization agrees to the following conditions:

1. The individual or organization confirms that the representations contained in the application forms for financial assistance are true and correct in every respect and that in the event that the funds are not used for the project or program as described in the application form, or if there are misrepresentations in the application form, the full amount of the grant will be payable forthwith to the City.
2. If there is any change in the funding of the project or program from that contemplated in the application form, the individual or organization will notify the City of such changes forthwith.
3. The individual or organization will make or continue to make attempts to secure funding from other sources as so indicated in the application form and Policy.
4. The individual or organization will keep proper books of accounts, of all receipts and expenditures relating to the project or program.
5. The individual or organization will make available for inspection by the City of its auditors, all records and books of accounts of the individual or organization upon request from the City.
6. That if the project or program proposed in the individual's or organization's application form is not commenced, or is not complete and there remain City funds on hand, or is completed without requiring the full use of the City funds, such funds will be returned to the City.
7. That the project or program not be represented as a City project, and that the individual or organization does not have the authority to hold itself out as an agency of the City in any way; the only relationship being the Council of The Corporation of the City of Thorold has approved and granted financial assistance to the individual or organization.
8. That if the individual or organization is involved in activities or assuming positions that are not consistent with the vision and values of The Corporation of the City of Thorold, Council reserves the right to suspend and potentially terminate grants at their sole discretion at any time.

Signature of Signing Officer on behalf of the organization:

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Print Name and Official Position:

Date:

**THE CORPORATION OF THE CITY OF THOROLD**  
RECREATION, ARTS AND CULTURE GRANTS TO VOLUNTEER ORGANIZATIONS  
APPLICATION FORM FOR FINANCIAL ASSISTANCE

**1. Eligibility Criteria**

**Please answer (x or √) “yes” or “no” to the following questions.**

	<b>Yes</b>	<b>No</b>
(A) Is your group physically located with The Regional Municipality of Niagara?		
(B) Do the majority of your group’s members, registrants, and/or participants reside in the City of Thorold?		
(C) Is your group a not-for-profit organization?		
(D) Is your group incorporated and/or registered under the Canada Income Tax Act for the purpose of receiving charitable donations?		
(E) Does your group have a formal administrative structure responsible for the overall management of the group’s resources, responsible for the administration of its funds and have a Board of Directors that is representative of the community you serve?		
(F) Have you provided your group’s audited financial statements for the previous fiscal year, and current year budget statements?		
(G) Will your proposed services be extended to all members of the general public in the City of Thorold, and not exclude anyone by reason of race, religion or ethnic background?		
(H) Are you applying for financial assistance to fund shortfalls resulting from programs or services of any kind that were commenced without prior consultation with the City?		
(I) Are you applying for financial assistance to fund cumulative deficits?		
(J) Are you applying for financial assistance to fund outstanding operating deficits?		
(K) Are you applying for financial assistance for retroactive funding (i.e. a service you have already begun to provide)?		
(L) Are you applying for a sport, cultural and recreational travel grant? Groups may apply for this type of assistance through the “Sports, Culture and Recreational Travel Grants Policy”, which is separate from this policy.		
(M) Are you applying for financial assistance for capital expenditures?		
(N) Are you seeking a grant while acting in the capacity of another funding organization?		
(O) If your group generates surplus revenue through the service for which you are seeking a grant will you donate that surplus to another group or organization?		

**2. Contact Information**

(A) Group’s Name and Contact Information

Name:	
Telephone Number:	
Address:	
Postal code:	
Email:	
Website:	
Not-For-Profit Registration Number:	

(B) Directors and Executive of Your Group and Their Contact Information (you must identify your Chief Executive Officer)

<b>Names</b>	<b>Position Within the Group</b>	<b>Address</b>	<b>Telephone #</b>
	Chief Executive Officer		

(C) Group’s Representative to be contacted on Financial Matters

Name:	
Position within the group:	
Telephone number:	
Address:	
Postal code:	

(D) Date and place of incorporation of your group?

(E) Describe the mandate of your group.

**3. Group Members and Volunteers**

(A) What is the total number of members/participants in your group?

(B) What is the total number of volunteers in your group?

**4. Staffing, Salaries and Wages in Your Group**

A) List all Full Time and Part Time positions in your group and salaries/wages.

<b>Position Title</b>	<b># of Persons in this Position</b>	<b>Is This a Full Time or Part Time Position?</b>	<b>Previous Year's Salary/Wage</b>	<b>Current Year's Salary/Wage</b>

B) List the Full Time and Part Time salaries/wages as a percentage of your group’s total expenditure budget.

	<b>Amount \$</b>	<b>% of Total Expenditures</b>
Full time salaries/wages		
Part time salaries/wages		
TOTAL		

**5. Your Group’s Financial Resources**

A) If your group has any funds set aside to be used for other purposes such as major projects or capital improvements, that are not included in your operating budget, please show (i) the amount, and (ii) the reasons that these assets have been set aside.

<b>Amount of Funds Set Aside</b>	<b>Reason</b>

B) Please list the registration, membership or services fees you charge per person for each service you provide, and for each show the total amount collected by your group, and what percentage of your total funding each one accounts for, for the previous year.

Service	Registration/ Membership/ Service Fee Charged per Member	Total Revenue Received From This Service	% of Your Total Funding

**6. Previous Grants Requested/Received From the City of Thorold**

(A) Has your group received a grant from the City of Thorold at any time in the past?

Yes  No

(B) If "YES", list the years for which assistance was provided, the amount of the request, and the amount received.

Year	Amount Requested	Amount Received
	\$	\$
	\$	\$
	\$	\$
	\$	\$

**7. Services for Which You are Seeking Financial Assistance from the City of Thorold**

(A) Describe the services for which you are seeking assistance. Please list individual programs, activities, special events, tournaments, competitions, performances, etc.

(B) Describe the community needs addressed by these services and how you determined the need for the services.

(C) Describe the goals and objectives of the services for which you are seeking funding.

(D) Describe how the goals and objectives of the services for which you are seeking funding will be achieved? Describe how you will measure the achievement of your goals and objectives.

(E) What age groups will be served? Please indicate the number and percentage of the total participants in your proposed services in each of the following age groups.

Age Group	Number of Participants	Percentage of Participants
0-4 years of age		%
5-9 years of age		%
10-14 years of age		%
15-19 years of age		%
20-39 years of age		%
40-64 years of age		%
65+ years of age		%
<b>TOTAL</b>		<b>100 %</b>

(F) What percentage of the participants in your proposed services will be residents of the City of Thorold and what percentage will be non-residents?

	Percentage of Participants
Residents	%
Non-residents	%

**8. Amount of Grant Requested:**

(A) What is the total dollar amount of grant you are seeking from the City of Thorold?

\$
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(B) This municipal grant represents what percentage of your total funding for the service?

	%
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**9. Use of and Impact of Municipal Grant**

(A) If your group were to receive grant funds from the City of Thorold, explain specifically how the grant funds would be used (i.e. applied to specific program areas, specific expenditures, specific activities, etc.).

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(B) Explain the impact the grant funds would have.

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**11. Coordination of Services**

(A) Please list the names of any other groups in the City of Thorold that may offer services similar to those which you are seeking funding as your group.

(B) If there are any other groups that offer the same services for which you are seeking funding, please describe whether there is any exchange/program coordination that takes place between the groups and/or any joint projects.

**12. Inclusiveness**

(A) Please describe how the service for which you are requesting City funding ensures accessibility for persons from diverse ethnic and cultural groups.

(B) Please describe how the service for which you are requesting City funding ensures accessibility for persons with disabilities.

**13. Measuring Service Outcomes**

(A) How will your service be evaluated to ensure that it has met the goals and objectives you specified?

(B) Identify the key outcomes that will be used to measure the attainment of goals and objectives.

(C) If this service is provided each year, does your group conduct an annual evaluation of the service?

Yes       No

(D) If this service is provided each year, and you **do not** conduct an annual evaluation, please explain the reason why not.

(E) Do you conduct participant satisfaction surveys?

Yes  No

(F) If you conduct participant satisfaction surveys, please describe how often they are conducted.

(G) If you **do not** conduct participant satisfaction surveys, please describe the reason why not.

**14. Acknowledging the City's Contribution**

If successful, how will you formally recognize/acknowledge the City's contribution?

**15. Additional Information Required. Attach the Following Information to Your Application**

- A) Detailed budget or forecast for the current year and one or more previous years.
- B) Detailed audited financial statements for the current year and one or more previous years.
- C) The results of your most recent participant satisfaction survey conducted, if applicable. Also, provide a copy of the survey form that participants complete.

**16. Conditions Associated With Grant Approval**

Having received approval for a community grant from The Corporation of the City of Thorold, the group agrees to the following conditions (please read the following and sign at the end to acknowledge that you have read and understood the conditions as presented):

- A) The group confirms that the representations contained in the application for a grant are true and correct in every respect and that in the event that the funds are not used for the service as described in the application, or if there are misrepresentations in the application, the full amount of the grant will be payable forthwith to the City of Thorold.
- B) If there is any change in the funding of the service from that contemplated in the application, the City of Thorold will be notified of such changes forthwith.
- C) That the group will make or continue to make attempts to secure funding from other sources as so indicated in this application.
- D) That the group will keep proper books of accounts, of all receipts and expenditures, relating to the project or program.

- E) That the group will make available for inspection by The Corporation of the City of Thorold or its auditors, all records and books of accounts of the organization upon request from the City.
- F) That if the service proposed in the group’s application is not commenced, or is not completed and there remains City of Thorold funds on hand, or is completed without requiring the full use of the City of Thorold funds, such funds will be returned to The Corporation of the City of Thorold.
- G) That the service not be represented as a City project and that the organization does not have the authority to hold itself out as an agency of the City in any way; the relationship being that the City has approved a community grant to the group.
- H) Within 30 days after the group’s service has been administered, the group must complete the “Final Report” and return it to the Recreation Coordinator. **Failure to complete the Final Report will render groups ineligible to apply for future grants under this program.**

**17. Authority and Acknowledgement**

Please have 2 signing officers of your group complete the following.

*We certify, to the best of our knowledge, that the information provided in this financial assistance request is accurate and complete, and it is endorsed by the group that we represent, and that we have read the policy and provisions and agree to all terms and conditions therein.*

Signature 1	Title	Date
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(PRINT NAME)

Signature 2	Title	Date
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(PRINT NAME)

**Availability of Information to the Public**

Please be advised that information in your grant application is collected under the authority of the Municipal Act, 2001, S.O. 2001, c. 25 and will be used to determine eligibility for municipal grants by the City, and as such, is subject to the provisions of the Municipal Freedom of Information and Protection of Privacy Act.

**THE CORPORATION OF THE CITY OF THOROLD**  
**RECREATION, ARTS AND CULTURE GRANTS TO VOLUNTEER ORGANIZATIONS**  
**APPLICATION FORM FOR IN-KIND ASSISTANCE**  
**FACILITY USER FEE SUBSIDY/CANTEEN OPERATION**

**1. Eligibility Criteria**

**Please answer (x or √) “yes” or “no” to the following questions.**

	Yes	No
(A) Is your group physically located with The Regional Municipality of Niagara?		
(B) Do the majority of your group’s members, registrants, and/or participants reside in the City of Thorold?		
(C) Is your group a not-for-profit organization?		
(D) Is your group incorporated and/or registered under the Canada Income Tax Act for the purpose of receiving charitable donations?		
(E) Does your group have a formal administrative structure responsible for the overall management of the group’s resources, responsible for the administration of its funds and have a Board of Directors that is representative of the community you serve?		
(F) Have you provided your group’s audited financial statements for the previous fiscal year, and current year budget statements?		
(G) Will your proposed services be extended to all members of the general public in the City of Thorold, and not exclude anyone by reason of race, religion or ethnic background?		
(H) Are you applying for a sport, cultural and recreational travel grant? Groups may apply for this type of assistance through the “Sports, Culture and Recreational Travel Grants Policy”, which is separate from this policy.		
(I) Are you seeking a grant while acting in the capacity of another funding organization?		
(J) If your group generates surplus revenue through the service for which you are seeking a grant will you donate that surplus to another group or organization?		

**2. Contact Information**

(A) Group’s Name and Contact Information:

Name:	
Telephone number:	
Address:	
Postal code:	
Email:	
Website:	
Not-For-Profit Registration Number:	

(B) Directors and Executive of Your Group and Their Contact Information (you must identify your Chief Executive Officer):

<b>Names</b>	<b>Position Within the Group</b>	<b>Address</b>	<b>Telephone #</b>
	Chief Executive Officer		

(C) Group’s Representative to be contacted on Financial Matters:

Name:	
Position within the group:	
Telephone number:	
Address:	
Postal code:	

(D) Date and place of incorporation of your group?

(E) Describe the mandate of your group.

**3. Group Members and Volunteers**

(A) What is the total number of members/participants in your group?

(B) What is the total number of volunteers in your group?

**4. Staffing, Salaries and Wages in Your Group**

A) List all Full Time and Part Time positions in your group and salaries/wages.

<b>Position Title</b>	<b># of Persons in This Position</b>	<b>Is This a Full Time or Part Time Position?</b>	<b>Previous Year's Salary/Wage</b>	<b>Current Year's Salary/Wage</b>



**6. Previous In-Kind Assistance Requested/Received From the City of Thorold**

(A) Has your group received in-kind assistance from the City of Thorold at any time in the past?

Yes  No

(B) If “YES”, list the years for which assistance was requested, the type of in-kind assistance, and the value of the in-kind assistance received.

Year	Type of In-Kind Assistance Requested	Value of Subsidy (TO BE INSERTED BY MUNICIPAL STAFF)
		\$
		\$
		\$

**7. Services for Which You are Seeking In-Kind Assistance from the City of Thorold**

(A) Describe the services for which you are seeking assistance. Please list individual programs, activities, special events, tournaments, competitions, performances, etc.

(B) Describe the community needs addressed by these services and how you determined the need for the services.

(C) Describe the goals and objectives of the services for which you are seeking assistance.

(D) Describe how the goals and objectives of the services for which you are seeking a subsidy will be achieved? Describe how you will measure the achievement of your goals and objectives.

(E) What age groups will be served? Please indicate the number and percentage of the total participants in your proposed services in each of the following age groups.

Age Group	Number of Participants	Percentage of Total Participants
0-4 years of age		%
5-9 years of age		%
10-14 years of age		%
15-19 years of age		%
20-39 years of age		%
40-64 years of age		%
65+ years of age		%
<b>TOTAL</b>		<b>100 %</b>

(F) What percentage of the participants in your proposed services will be residents of the City of Thorold and what percentage will be non-residents?

	<b>Percentage of Participants</b>
Residents	%
Non-residents	%

**8. Nature of In-Kind Assistance Requested**

A) How many hours of subsidized facility time are you seeking from the City of Thorold per season?

Facility Type	# of Hours Per Season		Time of Day Requested	Value of Subsidy (TO BE INSERTED BY MUNICIPAL STAFF)
	Prime Time	Non-Prime Time		
Ice – Whyte Arena				
Ice – Doherty Arena				
Soccer pitch/ baseball diamond				
Multi-purpose room/Community Centre				
Pool				

B) How many hours of canteen/concession operation are you seeking from the City of Thorold per season? What hours will you operate the canteen/concession?

Facility Type	# of Hours Per Season		Time of Day Requested	Value of Subsidy (TO BE INSERTED BY MUNICIPAL STAFF)
	Prime Time	Non-Prime Time		
Arena				
Soccer pitch/ baseball diamond				

(C) Describe in detail the City equipment and/or other services you are requesting?

**9. Use of and Impact of Municipal Assistance**

(A) If your group were to receive in-kind assistance from the City of Thorold, explain specifically how the assistance would be used (e.g. equipment) and the impact they would have.

(B) Explain the impact the assistance would have.

(C) If your request for a municipal in-kind service is not approved or is reduced, describe in detail the effect this will have on your group, your services and members/participants.

**10. Coordination of Services**

(A) Please list the names of any other groups in the City of Thorold that may offer services similar to those which you are seeking in-kind assistance.

(B) If there are any other groups that offer the same services for which you are seeking in-kind services, please describe whether there is any exchange/program coordination that takes place between the groups and/or any joint projects.

**11. Inclusiveness**

(A) Please describe how the service for which you are requesting City in-kind assistance ensures accessibility for persons from diverse ethnic and cultural groups.

(B) Please describe how the service for which you are requesting City in-kind assistance ensures accessibility for persons with disabilities.

**12. Measuring Service Outcomes**

(A) How will your service be evaluated to ensure that it has met the goals and objectives you specified?

(B) Identify the key outcomes that will be used to measure the attainment of goals and objectives.

(C) If this service is provided each year, does your group conduct an annual evaluation of the service?

Yes  No

(D) If this service is provided each year, and you **do not** conduct an annual evaluation, please explain the reason why not.

(E) Do you conduct participant satisfaction surveys?

Yes  No

(F) If you conduct participant satisfaction surveys, please describe how often they are conducted.

(G) If you **do not** conduct participant satisfaction surveys, please describe the reason why not.

**13. Acknowledging the City's Contribution**

If successful, how will you formally recognize/acknowledge the City's contribution?

**14. Additional Information Required. Attach the Following Information to Your Application**

- (A) Detailed budget or forecast for the current year and one or more previous years.
- (B) Detailed audited financial statements for the current year and one or more previous years.
- (C) The results of your most recent participant satisfaction survey conducted, if applicable. Also, provide a copy of the survey form that participants complete.

### **15. Conditions Associated With In-Kind Service Approval**

Having received approval for in-kind services from The Corporation of the City of Thorold, the group agrees to the following conditions (please read the following and sign at the end to acknowledge that you have read and understood the conditions as presented):

- (A) The group confirms that the representations contained in the application for in-kind assistance are true and correct in every respect.
- (B) If there is any change in the in-kind assistance from that contemplated in the application, the City of Thorold will be notified of such changes forthwith.
- (C) That the group will make or continue to make attempts to secure in-kind assistance from other sources as so indicated in this application.
- (D) That the group will keep proper books of accounts, of all receipts and expenditures, relating to the project or program.
- (E) That the group will make available for inspection by The Corporation of the City of Thorold or its auditors, all records and books of accounts of the organization upon request from the City.
- (F) That the service not be represented as a City project and that the organization does not have the authority to hold itself out as an agency of the City in any way; the relationship being that the City has approved an in-kind grant to the group.
- (G) Within 30 days after the group's service has been administered, the group must complete the "Final Report" and return it to the Recreation Coordinator. **Failure to complete the Final Report will render groups ineligible to apply for future in-kind assistance under this program.**



**THE CORPORATION OF THE CITY OF THOROLD**  
RECREATION, ARTS AND CULTURE GRANTS TO VOLUNTEER ORGANIZATIONS  
APPLICATION FORM FOR IN-KIND ASSISTANCE  
ONE TIME EVENT/SERVICE

**1. Eligibility Criteria**

Please answer (x or √) “yes” or “no” to the following questions.

	Yes	No
(A) Is your group physically located with The Regional Municipality of Niagara?		
(B) Do the majority of your group’s members, registrants, and/or participants reside in the City of Thorold?		
(C) Is your group a not-for-profit organization?		
(D) Is your group incorporated and/or registered under the Canada Income Tax Act for the purpose of receiving charitable donations?		
(E) Will your proposed services be extended to all members of the general public in the City of Thorold, and not exclude anyone by reason of race, religion or ethnic background?		
(F) Are you seeking a grant while acting in the capacity of another funding organization?		
(G) If your group generates surplus revenue through the service for which you are seeking a grant will you donate that surplus to another group or organization?		

**2. Contact Information**

(A) Group’s Name and Contact Information:

Name:	
Telephone number:	
Address:	
Postal code:	
Email:	
Website:	
Not-For-Profit Registration Number:	

(B) Group’s representative to be contacted:

Name:	
Position within the group:	
Telephone number:	
Address:	
Postal code:	

(C) Describe the mandate of your group.

**3. Previous In-Kind Assistance Received From the City of Thorold**

(A) Has your group received in-kind assistance from the City of Thorold at any time in the past?

Yes  No

(B) If “YES”, list the years for which assistance was requested, the type of in-kind assistance, and the value of the in-kind assistance received.

Year	Type of In-Kind Assistance Requested	Value of Subsidy/Grant (TO BE INSERTED BY MUNICIPAL STAFF)
		\$
		\$
		\$

**4. Current In-Kind and/or Financial Assistance Requested From the City of Thorold**

(A) Has your group applied for any other in-kind and/or financial assistance from the City of Thorold this year?

Yes  No

(B) If “YES”, list the type of in-kind and/or financial assistance, and the value of the in-kind and/or financial assistance requested.

Year	Type of In-Kind Assistance Requested	Value of Subsidy/Grant (TO BE INSERTED BY MUNICIPAL STAFF)
		\$
		\$
		\$

**5. Services for Which You are Seeking In-Kind Assistance from the City of Thorold**

(A) Describe the services for which you are seeking assistance. Please list individual programs, activities, special events, tournaments, competitions, performances, etc.

(B) Describe the community needs addressed by these services and how you determined the need for the services.

(E) What age groups will be served? Please indicate the number and percentage of the total participants in your proposed services in each of the following age groups.

<b>Age Group</b>	<b>Number of Participants</b>	<b>Percentage of Total Participants</b>
0-4 years of age		%
5-9 years of age		%
10-14 years of age		%
15-19 years of age		%
20-39 years of age		%
40-64 years of age		%
65+ years of age		%
<b>TOTAL</b>		<b>100 %</b>

(F) What percentage of the participants in your proposed services will be residents of the City of Thorold and what percentage will be non-residents?

	<b>Percentage of Participants</b>
Residents	%
Non-residents	%

**6. Acknowledging the City’s Contribution**

If successful, how will you formally recognize/acknowledge the City’s contribution?

**7. Conditions Associated With In-Kind Service Approval**

Having received approval for in-kind services from The Corporation of the City of Thorold, the group agrees to the following conditions (please read the following and sign at the end to acknowledge that you have read and understood the conditions as presented):

- (A) The group confirms that the representations contained in the application for in-kind assistance are true and correct in every respect.
  
- (B) That the service not be represented as a City project and that the organization does not have the authority to hold itself out as an agency of the City in any way; the relationship being that the City has approved an in-kind grant to the group.

**8. Authority and Acknowledgement**

Please have 2 signing officers of your group complete the following.

*We certify, to the best of our knowledge, that the information provided in this financial assistance request is accurate and complete, and it is endorsed by the group that we represent, and that we have read the policy and provisions and agree to all terms and conditions therein.*

_____ Signature 1	_____ Title	_____ Date
_____ (PRINT NAME)		
_____ Signature 2	_____ Title	_____ Date
_____ (PRINT NAME)		

<p style="text-align: center;"><b><u>Availability of Information to the Public</u></b></p> <p>Please be advised that information in your grant application is collected under the authority of the Municipal Act, 2001, S.O. 2001, c. 25 and will be used to determine eligibility for municipal grants by the City, and as such, is subject to the provisions of the Municipal Freedom of Information and Protection of Privacy Act.</p>
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**3. Remaining Grant Funds**

A) After the conduct of your service, do you have any remaining/unspent grant funds?

Yes  No

B) If YES, please identify the amount of grant funding remaining/not spent.

\$

**4. Other Surplus Funds**

A) Did your service generate surplus revenue?

Yes  No

B) If YES, please identify the amount of the surplus.

\$

**5. Achievement of Goals and Objectives**

Describe how the service you provided with the grant funding met the goals and objectives you identified in your grant application.

**5. Issues**

A) Did you experience any issues when delivering your service?

Yes  No

B) If YES, please explain the issues you encountered and either i) how you resolved them, or ii) the reason you were not able to resolve them.

**6. Acknowledgment of the City's Contribution**

Describe how you acknowledged the City's contribution.

**7. Disclaimer and Signature**

Please have 2 signing officers of your group complete the following.

*We certify, to the best of our knowledge that the information provided in this Final Report is accurate and complete, and it is endorsed by the group that we represent.*

_____ Signature 1	_____ Title	_____ Date
_____ (PRINT NAME)		
_____ Signature 2	_____ Title	_____ Date
_____ (PRINT NAME)		