



NATIONAL DAY FOR TRUTH AND RECONCILIATION

FUNDING APPLICATION FORM

Instructions

Please complete all sections, sign, and date the form and return to em_raby@gov.nt.ca before September 2nd, 2022.

Grant Decisions

All applications received by the application deadline are screened for eligibility. Grant decisions are made and communicated in writing to applicants after the application deadline and review process. Funding under this program is limited.

Obligations of Recipient

Recipients are not required to provide any financial reporting after the event.

PLEASE COMPLETE ONE APPLICATION PER EVENT PER COMMUNITY.



1. EVENT TYPE

This application is solely related to funding for the National Day for Truth and Reconciliation on September 30. For funding requests for events such as General Assemblies, Special Assemblies, National Indigenous Peoples Day or other events please fill out the [Special Events Funding Application Form](#).

Type of Event	Eligible Applicant	Maximum amount available
National Day for Truth and Reconciliation	Indigenous Government or Indigenous Organization	\$2,500

2. APPLICANT CONTACT INFORMATION

Name of Applicant Government or Organization:	
Contact Person:	
Title of Contact Person:	
Alternate Contact Person:	
Telephone:	
Mobile Phone:	
Email:	
Fax:	
Mailing Address:	

3. ABOUT THE APPLICANT

- ☐ Indigenous Government
- ☐ Indigenous Organization
- ☐ A society created under the *NWT Societies Act*

Registered Society Name: _____



4. EVENT INFORMATION

Event Name:	
Event Location (Community):	
Event Start Date:	
Event End Date:	
Event Description:	

Is the event in collaboration with another Indigenous government or Indigenous organization?

☐ NO

☐ YES (please list partners involved and specify their role in the event)

Partners: _____

5. EVENT COSTS (round to the nearest dollar)

PLANNED EXPENDITURES: <i>Itemize and list costs</i>	
Total Planned Expenditures (A)	



ANTICIPATED REVENUE: List any financial support from other organizations, federal and/or territorial departments and agencies, municipal government (<i>give name and amount</i>)	
DONATIONS IN-KIND	
Total Anticipated Revenue (B)	
Total Planned Expenditures (A)	
Minus Total Anticipated Revenue (B)	
Funding Requested (C)	
List items and amounts from Planned Expenditures to be paid for by this funding.	



6. NAME AND SIGNATURE OF AN OFFICIAL(S) AUTHORIZED TO ENTER INTO THE PROPOSED AGREEMENT ON BEHALF OF THE APPLICANT.

Name _____

Title _____

Signature _____

Name _____

Title _____

Signature _____

7. CERTIFICATION:

I certify that the information given is accurate and complete, and that the event proposal is fairly presented. I agree to publicly acknowledge funding and assistance by the Minister of Executive and Indigenous Affairs in accordance with the terms of the funding agreement. I understand the information provided in this application may be accessible under the *Access to Information and Protection of Privacy Act*.

Authorized Signature

Name _____

Title _____

Date _____