



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 by September 4, 2026.

This Application will act as the final agreement, please ensure all 4 pages are complete and page 4 includes signatures in order to be considered.

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. This Funding is for Indigenous governments and Indigenous organizations in the Northwest Territories. Program funding is limited and will be allocated until it is exhausted.

Obligations of Recipient

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

PLEASE COMPLETE ONE APPLICATION PER COMMUNITY.



1. EVENT TYPE

This application is solely related to funding for the National Day for Truth and Reconciliation activities in the NWT on September 30, 2026. For funding requests for other events please email em_raby@gov.nt.ca

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 Indigenous 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: Please include a detailed cost estimate <i>Reminder: ineligible costs include assets, admin fees, honoraria, salaries, vehicles</i>	

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. NAME AND SIGNATURE OF AN OFFICIAL(S) AUTHORIZED TO ENTER INTO THE PROPOSED AGREEMENT ON BEHALF OF THE INDIGENOUS GOVERNMENT or ORGANIZATION 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 _____