

2025 Futures Grant Application Form

Applicant Information				
Legal Name of Applicant:				
Mailing Address:				
City: Postal Code:				
Phone: Website:				
Organization/Business Number: (Federal number used for HST, payroll, etc. If you do not have one, enter N/A)				
Contact Person: Title:				
Contact Phone: Email:				
Type of Organization: Business Municipality BIA Not for Profit				
Organization Start Date (DD/MM/YY):				
Has this organization received Community Futures Grenville Funding in the last two years?				
Yes No				
If yes, please provide information on past projects.				
Provide a brief description of your organization or business. Discuss how your organization or business impacts Grenville County and/or its communities: North Grenville, Edwardsburgh Cardinal, Augusta, and/or Prescott.				



Empowering Entrepreneurs **Project Information** Project Location: Project Title: Number of Start Date (DD/MM/YY): End Date (DD/MM/YY): Community Partners: Total Project Cost (\$): Total Requested from CF Grenville(\$): Describe your project. How will it create a lasting impact and contribute to long-term sustainability, inclusivity, and/or prosperity in Grenville County? Explain how this initiative is incremental (a new initiative, or an expansion of existing activities). Explain how your organization has the resources (human, financial, partnership, etc.) to take on this initiative.



Project Impact

List and describe anticipated outcomes of this project for the community. How will you measure the success of the project?
How will the impacts of your project be sustained in years to come, leaving a lasting legacy?
Describe the partnerships that are in place to help deliver the project. Please identify each partner and describe the nature of their support for the project.
How critical is this funding to the successful completion of your project? Please describe the impact that receiving this grant would have on your organization's ability to deliver the project.



Project Work Plan

Identify project tasks, timeline, person responsible, and measurable results. Funding is available for activities that begin after **June 20, 2025**, and all funds provided must be spent by the following **March 31, 2026** with all claims submitted by **April 15, 2026**.

Task/Milestone	Date Range	Responsible	Measurable Result(s)

Project Budget

Identify the funds required for the project.

DESCRIPTION OF ELIGIBLE COST	Cost (Excl. HST) (\$)
TOTAL Project Cost:	\$ 0.00

Project Resources

Please list all other contributions to this project, including those of your own organization. Where applicable, please provide information on when unconfirmed contributions will be finalized, as well as evidence for confirmed resources from other agencies. While in-kind contributions to the project are not included in the calculation of the 50% cost share, they are important to demonstrate additional community partnerships. Please exclude HST.

CONTRIBUTION SOURCE	Confirmed (Y/N)	Cash (\$)	In-kind (\$)
TOTAL:		\$ 0.00	\$ 0.00

Date

Application Checklist	
Completed Application Form Copy of Articles of Incorporation or Business National Statements for most recent fiscal year Terms of Reference for Consultants (where Two quotations from consultants/suppliers (who Motion demonstrating project endorsement of Evidence of community support (e.g., letters of	ar-end (N/A for municipalities) applicable) ere applicable) applicant organization (N/A for businesses)
Authorization	
required by law and by Community Futures Grenville nandle my personal information in strict confidence in Community Futures Grenville's Privacy Policy. If I have my information, I may refer to Community Futures Grenontact the Chief Privacy Officer. This application form must be digitally or manually sign for processing. The undersigned certifies that all informations application is true and complete and underequired for Community Futures Grenville to render a	If purpose of determining my eligibility for funding as is I understand that Community Futures Grenville will accordance with federal privacy law as set out in we any questions or concerns about the management of enville's Privacy Policy available at www.cfgrenville.ca or med by the proper authority of the applicant to be eligible mation provided to Community Futures Grenville in indertakes to provide any further information that may be a decision. The undersigned also herewith provides efficient credit and other enquiries that may be necessary mature provided in any of the documents provided to application, shall constitute an electronic signature within
Authorized by.	
Signature	Name and Title (please print)
Signature	Name and Title (please print)

PAYMENT OF COMMUNITY FUTURES GRENVILLE CONTRIBUTIONS

Detailed instructions and claim forms will be provided to applicants if their projects are approved by Community Futures Grenville. However, applicants may find the following general information useful in their financial planning.

All approved contributions exclude HST.

To receive payment, applicants will be required to file a claim upon completion of the project. Copies of all paid invoices and proof of payment must accompany the claim. Community Futures Grenville may request further information as required.

The approved Community Futures Grenville contribution will be released following successful completion of the project, submission of the final claim and final report. If these requirements are met when submitting the claim, the approved funds will be disbursed out at 100%.

Applicants are required to maintain proper books and records of the costs of the project, and to provide Community Futures Grenville with access to these records when requested.

If applicants arrange for bridge financing of their Community Futures Grenville contribution with a bank or other financial institution, Community Futures Grenville will accept a direction to pay the proceeds of a Community Futures Grenville contribution jointly to an applicant and the financial institution providing the bridge financing.