

Miziwe Biik Aboriginal Employment & Training

Grant Application Form 2025-2026 Fiscal Year

Name of Applicant Group:				
Address:				
Phone:	Fax:			
Name of Project:				
Contact Person for This Project:				
Email:				
Position of Contact Person:				
Project Start Date:	Completion Date:			
Total Funding Requested:				
Please indicate the program for whic	h you are applying from the ALFDC program guide.			
Employment Assistance Support	Measure			
Targeted Wage Subsidy				
Self-Employment Assistance Program				
Job Creation Partnership				
Local Labour Market Partnership				
Other: (Please Specify)				
Date Submitted:				
Signature:	Position:			
Authorized Signing Offic	Cer			

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Please submit original hard copy with mandatory attachments to Miziwe Biik front desk reception, ATTN: Projects Department- Grant Application

1) Please provide a brief summary of your project.

2) History of Your Organization (Include your mission statement, goals and programs, organizational chart and list of Board of Directors, outlining names, addresses and areas of expertise. These may be included as attachments.)

3) Project Goal (s), Objectives, Activities, Anticipated Results/Outcomes, and Time-Frames: Please provide details on the chart on the following page.

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## Project Goals:

# Objective	Activities	Anticipated Results/Outcomes	Time-Frame

Note: Use additional pages if necessary.

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4) Where does program fit in the Indigenous Community?

5) Training Plan: Please provide details of training, curriculum (if applicable), who will be providing training and qualifications of trainer. Trainer's resume may be included as an attachment.

6) Are there any partners involved in this project? If so, please list name, address, telephone number and contact person for each partner. List the role of each partner in the project.

- 7) Job Descriptions: Please attach all applicable job descriptions.
- 8) Recruitment Strategy: How will you recruit staff and/or participants for your project?

9) What is the Cultural Component?

10) Is your organization currently receiving funding? If so, from what sources?

**11)** Have you received funding from Miziwe Bilk in the past? Please explain which programs, and fiscal years.

12) Which funding sources will your organization be pursuing to ensure that this project becomes permanent and core funded? Please include a detailed course of action.

13) Budget: Please attach a detailed budget breakdown for your project. Provide an explanation for each cost category. Quotes from three suppliers must be attached for equipment and outside training.

Item applied for under program guidelines:	Amount Applied For:
	Total:

14) Attachments: Please attach the following to your application (Mandatory):

- Motion From Your Board of Directors (Mandatory)
- Letters Patent (Mandatory)
- Personnel Policy (Mandatory)
- Most Recent Audited Financial Statement (Mandatory)
- Annual Report (Mandatory)
- Letters From Partners (if applicable)
- Letters of Community Support (optional)
- Business Plan (for Self-Employment Assistance Program applicants only)
- Workplace Safety and Insurance Board (WSIB) (Mandatory)
- Company Liability Insurance (Mandatory)

\*\*\*Please note any incomplete applications will not be reviewed

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