



Islands Trust

ATTACHMENT 1

ISLANDS TRUST

**HISTORY, HERITAGE AND CONSERVATION – GRANTS-IN-AID APPLICATION FORM**

Name of Person or Organization:	
Address of Person or Organization:	
Full Mailing Address:	
Telephone Number:	
Email address:	
Contact Person:	
First Nation membership or self-identity	
Primary purpose of organization:	
Service you provide to the community:	
Number of clients or people that use your service:	
Cultural Knowledge Holder or Traditional Ecological Knowledge:	
Amount of Grant-in-aid Requested:	
Purpose of the grant-in-aid:	Conservation    History    Heritage
Describe how the grant-in-aid will be used:	
Describe how the grant-in-aid will support the object of the Islands Trust, the Islands Trust Policy Statement or an Islands Trust Strategic Plan or Islands Trust Reconciliation Declaration item.	
Have you received a previous grant-in-aid from the Islands Trust:	Yes    no (if yes, please list grants received)
Applicant Signature	
Date of Signature	

**Internal Use Only:**

Date of EC Resolution:

Amount Approved:

*Collection Notice: Personal information contained on this form is collected under the authority of the Local Government Act and is subject to the Freedom of Information and Protection of Privacy Act. The personal information will be used for purposes associated with the 2017 Community Stewardship Awards program. Enquiries about the collection or use of information in this form can be directed to Carmen Thiel, Legislative Services Manager at 250-405-5188.*