



Newmarket Community Action Table (CAT) Project Quick Action Grant Application 2024 - Residents Round 2

Summary

The resident-led Quick Action Grant initiatives will address the community priorities of housing stability and mental well-being. Quick Action Grants of up to \$2,000 will support projects led and delivered by residents that address community priorities. These are short-term projects that should be delivered within 5 months. These projects should focus on a community activity that does any of the following:

- Focuses on an action or activity related to mental well being or housing stability
- Focuses on an action or activity designed to inspire the local community
- Focuses on an action or activity that supports creating stronger connections among residents in the area and/or between residents and other stakeholders

Eligibility

- Alignment to local priorities and fund objectives
- Clear articulation of the project throughout the application
- Financial request is in line with the proposed activities
- Project demonstrates local support of at least 5 residents & community partners as relevant
- Applying community members, groups and agencies operate in or resident within the local area
- If the proposed initiative is part of a larger project for which the applicant has received funding, there must be a clear demonstration that the funding supports a new activity
- Projects should be completed in 5 months from notification of approval
- Be started by at least 5 residents in the community who are not related to each other and do not live at the same address. The residents are either members of a resident group or they have come together to implement a community project. Grants cannot be issued to individuals
- Willingness to work with the Newmarket Community Action Table as the trustee

Trusteeship

Successful resident applicants will be supported by Newmarket CAT as their administrative partner. More information about the trustee relationship will be provided in orientation sessions.

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| <u>Eligible Expenses</u> | <u>Non-Eligible Expenses</u> |
|--|--|
| Food for participants at event/activity | Donations to other groups or organizations, religious groups, or political parties |
| Entertainment fees | Fines and penalties |
| Promotion, advertising, and communications | Alcoholic beverages |
| Speaker fees | Membership fees in clubs and organizations |
| Municipal permits or approval fees | Maintaining existing services |
| Honoraria for volunteers not exceeding 30% of the total requested amount | Regular salaries and rent of office space |
| Online platform subscriptions | Support to ongoing already funded programs or activities where this funding would duplicate other funding received |

Steps

- Attend information session (optional)
- Note timeline/deadlines
- Complete the Application Form
- **Submit application to khalil@routesc.org by 4:00PM September 27th, 2024**

Timeline

| | |
|-----------------------------|---|
| Application Open | September 9, 2024 |
| Information Sessions | September 9 from 4:30pm-6:00pm September 16 from 11:00am-12:30pm |
| Application Deadline | 4:00pm September 27, 2024 |
| Grant Selection Team Review | September 30 to October 9 2024 |
| United Way Review | October 14 - 18, 2024 |
| Notify Applicants | October 21-25, 2024 |
| Project Reports Deadline | March 31, 2025 |

All completed applications must be submitted electronically to Khalil Prescod at khalil@routesc.org by 4:00 pm on Friday September 27th, 2024.

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1. Project name:

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2. Please list the community in which your project will take place.

| | |
|--------------------------|----------------------|
| <input type="checkbox"/> | Newmarket Northwest |
| <input type="checkbox"/> | Newmarket Central |
| <input type="checkbox"/> | Newmarket Heights |
| <input type="checkbox"/> | Newmarket Armitage |
| <input type="checkbox"/> | Newmarket Stonehaven |
| Other | |

3. Have you ever received a Quick Action Grant?

Yes/No

Name of Project:

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4. Are you working with a specific population (e.g. youth, seniors, 2SLGBTQ+, a specific ethno-cultural community)? If so, please list which population(s).

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5. **Group Lead Contact Information** (the person we would call to ask questions about the application or to inform regarding the application results):

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|------------------------|--|
| Primary Contact Person | |
| Position/Role | |
| Address | |
| Phone | |
| Email | |
| Date submitted | |

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|--------------------------|--|
| Secondary Contact Person | |
| Position/Role | |
| Address | |
| Phone | |
| Email | |

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6. Provide us with the contact information of your group members:

- Resident-led groups with 5 or more members are eligible to apply for the Quick Action Grant
- Each group member must live in a **separate household**

| Name | Address | Email/Phone (this individual may be contacted to confirm participation) | Roles and/or Responsibilities |
|------|---------|---|-------------------------------|
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7. Please indicate the key priority that your project addresses. Please select one:

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|--------------------------|-------------------|
| | Priority Area |
| <input type="checkbox"/> | Mental Well Being |
| <input type="checkbox"/> | Housing Stability |

8. Please indicate which action area your project addresses. Select as many that are appropriate:

| | | | |
|--------------------------|------------------------------------|--------------------------|------------------------------|
| <input type="checkbox"/> | Youth Peer Support | <input type="checkbox"/> | Neighbourhood Safety |
| <input type="checkbox"/> | Adult Peer Support | <input type="checkbox"/> | Self Help/Caregiver Support |
| <input type="checkbox"/> | Essential Needs | <input type="checkbox"/> | Neighbourhood Connectiveness |
| <input type="checkbox"/> | Cultural and Social Inclusion | <input type="checkbox"/> | Resident Education/Training |
| <input type="checkbox"/> | Service Navigation | <input type="checkbox"/> | Youth and Family Engagement |
| <input type="checkbox"/> | Housing Rights, Supports & Options | <input type="checkbox"/> | Technology Solution/Support |
| <input type="checkbox"/> | Green Space/Green Activity | <input type="checkbox"/> | Movement/Physical Activity |
| <input type="checkbox"/> | Violence Prevention | <input type="checkbox"/> | Other: |

9. Project Description:

Please describe your group’s project. Tell us **what you want to do; and when, where, why and with whom you** want to do the project. What does your project hope to accomplish? (Approximately 100 words)

What:

When:

Where:

Why:

Who:

10. Briefly explain how residents will be involved in the development and/or implementation of your project:

11. Are you working with any other partners in the community to implement your project? If so, please indicate who those partners are and how they will be supporting the project. Also indicate if you have already spoken with the group(s) that you have listed before applying. Examples of partners could include community services, municipal services (such as libraries or recreational centres), schools, building management, or faith organizations:

12. How many local residents will be involved in your project as participants?

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13. When will your project start and end? Please provide the calendar dates:

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|--------|
| Start: |
| End: |

14. Describe the steps you will take in organizing and delivering your event or activity.

| Steps | Who will be doing it? | When will it be completed? |
|---|---|---|
| <i>(Examples – what will be done re: outreach, implementation, evaluation)</i> | <i>(Examples – who will this task be completed by: resident(s) listed in the application, a project partner or other?)</i> | <i>(Example – When is the timeframe for completion. Can be specific date or date range i.e. July 2024)</i> |
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15. Budget:

Your request may total up to \$2,000.00.

Instructions for budget completion:

- Review the list of eligible and ineligible expenses
- Use the budget table below to tell us how much cash you need to complete your Quick Action Grant activity
- List as many details as possible to give a picture of what the money will be used for before, during and, if needed, after any event/activity
- Your request can be up to \$2,000.00 over a timeframe of up to 3 months
- Budgets will vary depending on a range of factors such as project scope and intended impact

Budget table:

| Column A | Column B |
|---|------------------|
| Description of requested funding | Amount requested |
| <i>Example: T-shirts for youth event at \$5.00 each for 24 t-shirts</i> | <i>\$120.00</i> |
| <i>Example: Room rental for meeting space for 8 sessions (\$50.00 x 8)</i> | <i>\$400.00</i> |
| <i>Example: Transportation costs for program participants – 100 transit fares at \$3.25</i> | <i>\$325.00</i> |
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| Total Project Funding Request | \$ 0.00 |

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16. Evaluation Plan:

Please complete the following table. We have provided some examples in the table to help you:

| <p>What are your project goals? (Include up to 2 goals that your project is focusing on)</p> <p><i>Examples: Increased safety in the neighbourhood; improved mental wellbeing among residents.</i></p> | <p>How will you collect this information or know if your goal has been achieved?</p> <p><i>Examples: We will talk to residents after our project and ask them if they feel safer walking in the neighbourhood and we'll write a summary of our discussion.</i></p> |
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17. Proposal to be signed by lead contact person for the project (Refer to Page 1):

I agree that by signing this application I will:

- Use funds only for the purpose granted
- Work with (Newmarket Community Action Table), to maintain records, project activities, and costs
- Work with my project team members
- **Complete all reporting requirements for the Quick Action Grant by March 31st 2025**

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|------------------|--|
| Project Contact: | |
| Signature: | |
| Date: | |

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|----------------------------|--|
| Secondary Project Contact: | |
| Signature: | |
| Date: | |

Please submit your application to khalil@routesc.org by 4:00 pm on Friday September 27th, 2024