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**COMMUNITY ENHANCEMENT GRANTS APPLICATION FOR 2026 PROJECTS**

Community Enhancement Grants (CEG) support the goals of the District of Squamish’s Official Community Plan, to create a community that is: Liveable, Healthy, Resilient, Connected and Engaged.

Successful recipient programs will:

o Increase community capacity

o Encourage and foster community involvement and volunteerism

o Promote a healthy, caring, safe and supportive community for all

o Demonstrate community partnerships and leveraging of resources

o **Benefit District of Squamish residents**

**Application deadline is Monday, November 17th, 2025.**

Submit completed Grant Application and all supporting documentation (listed in Section 3) to info@squamishfoundation.com.

The Community Enhancement Grant Applicant Guide can be found here: [www.squamishfoundation.com/grants/#communityenhancement](http://www.squamishfoundation.com/grants/#communityenhancement). Organizations can apply for either a Community Enhancement Grant or an Arts and Culture Grant but not both. CEG funded projects must take place between January 1 and December 31, 2026 and be located in Squamish.



Funding Provided by The District of Squamish

**SECTION 1: APPLICANT AND ORGANIZATION DETAILS**

Name of Organization: Enter text here

Name of Contact Person: Enter text here

Job Title (or relationship to organization): Enter text here

Phone Number: Enter text here

Email Address: Enter text here

Mailing Address: Enter text here

Physical Address of Project (if different from organization): Enter text here

Organization Registered Charity # or BC Society Incorporation #: Enter text here

How did you hear about the Community Enhancement Grants? Enter text here

**SECTION 2: GRANT REQUEST DETAILS**

1. **Name of Project/Program:** Enter text here
2. **Type of Grant (check all that apply to your Project):**

\_\_ Decolonization and Reconciliation Initiative

\_\_ Intergenerational Programming

\_\_ Enhancement of Neighbourhood Connectivity

\_\_ Environmental Stewardship, Sustainability and/or Climate Action

\_\_ Equity, Diversity, Inclusion and Access (IDEA) Programming

\_\_ Support of Physical Health, Mental Health and/or Social Wellbeing

\_\_ Youth-led Initiative/Programming

\_\_ Programming for Social Services that Assist Squamish’s Vulnerable Populations

\_\_ Sports and Recreation Programming

1. **Describe your project activities and its goals and/or the environmental issue(s) addressed by this project. (Max 250 words)**

Enter text here

1. **Provide a timeline for project activities including start and completion dates. (Max 100 words)**

Enter text here

1. **Describe specifically how your project will support the goals of the District of Squamish’s Official Community Plan. (Max 200 words)** [**https://squamish.ca/yourgovernment/official-community-plan/**](https://squamish.ca/yourgovernment/official-community-plan/)

Enter text here

1. **Will you be collaborating, partnering and/or leveraging resources with other organizations on this project? Provide names of partners and the value and description of their contributions. (Max 200 words)**

Enter text here

1. **How many local people will benefit from this project, including a description of the population(s) served (Inclusion, Diversity, Equity and Access (IDEA)integration) or if applicable, the degree of positive, local environmental impact? (Max 200 words)**

Enter text here

1. **How will you measure the success of your project? (Max 200 words)**

Enter text here

1. **Please describe how your project/program will sustain itself after this funding cycle ends, if applicable. (Max 200 words)**

Enter text here

**SECTION 3: REQUIREMENTS & ACKNOWLEDGMENTS**

|  |
| --- |
| Please submit the following documents with your completed *Community Enhancement Grants Application Form*:  \_\_ The most current financial statements of the applicant organization  \_\_ Verification of additional funding sources, if applicable  \_\_ Schedule 1 Proposed Project Budget or an operating budget which discloses how the grant will be used. |

# Freedom of Information and Protection of Privacy Act

*The personal information collected on this form is done so in accordance with the Freedom of Information and Protection of Privacy Act. The personal information collected herein will be used only for the purpose of processing this application or request and for no other purpose.*

Signature of Applicant: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:

Name (printed): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Position with the Organization: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*I have the authority to bind the corporation. Please check the box.*

*Successful applicants may receive partial project funding. Applicants must ensure their project can succeed with partial funding when considering applying for a Community Enhancement Grant.*

*Ideally organizations should apply for funding amounts between $2,000 and $10,000 but other amounts will be considered.*

Community Enhancement Grant (CEG) Application ‐ Schedule 1

Proposed Project Budget

**Applicant Organization:** Enter text here **Grant Year:** 2026

|  |  |  |
| --- | --- | --- |
| **REVENUE** | **PROPOSED BUDGET**  **Dollar Figure** (Submit with Application) | **ACTUALS** (Complete and submit with report, following project conclusion) |
| **Other Grants:** | | |
| 1. |  |  |
| 2. |  |  |
| **Other Revenue** (including in-kind and volunteer services:) | | |
| 1. |  |  |
| 2. |  |  |
| 3. |  | **CEG Amount Received: $** |
| **TOTAL REVENUE:** |  |  |
|  | | |
| **EXPENSES** | | |
| \*Wages and Benefits |  |  |
| Professional Services |  |  |
| Disability Supports for Staff |  |  |
| Volunteer Training |  |  |
| Materials and Supplies |  |  |
| Printing and Communications |  |  |
| Utilities |  |  |
| Event Insurance |  |  |
| Rental of Premises |  |  |
| Equipment Rental or Purchase |  |  |
| Knowledge Development Activities |  |  |
| Performance Monitoring, Data Collection or Reporting Costs |  |  |
| Advertising and Promotional Costs |  |  |
| Other (List:) |  |  |
| 1. |  |  |
| 2. |  |  |
| 3. |  |  |
| **TOTAL EXPENSE:** |  |  |
|  | | |
| **REVENUE MINUS EXPENSES :** |  | **$0** |

\*For wages and benefits (or other operational costs) describe how these cover the project timeframe only and are otherwise sustainable in future without continued grant funding:

Enter text here

**Amount of Community Enhancement Grant Requested (Same as ‘Revenue Minus Expenses): $** Enter text here