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| --- | --- | --- | --- |
| **Name and Address** | | | |
| Today’s date: Click here to enter a date.  Name of organization: Click here to enter text. | Who is managing the program? Click here to enter text.  Who is delivering the program? Click here to enter text.  To whom should the cheque be made out? Click here to enter text. | | |
| Mailing address: Click here to enter text. | Phone: Click here to enter text.  Fax: Click here to enter text.  E-mail: Click here to enter text. | | |
| *If your funding is approved, you will receive your funding letter and cheque at the mailing address above. However, if you would like to receive the rest of your paperwork (report form and evaluation how-to-kit) by email, please check the box below:*  I want to receive my report form and evaluation how-to-kit by email. | | | |
| Name of person with family literacy training: Click here to enter text. | | | |
| Where were they trained? Click here to enter text. | | | When? Click here to enter text. |
| Information about your project | | | |
| Program dates - if known. **Programs must be completed by March 31, 2020**.  Click here to enter text. | | | |
| Number of weeks: Click here to enter text. | | | Number of hours per week: Click here to enter text. |
| Program location in the community (i.e. Friendship Centre, daycare): Click here to enter text. | | | |
| Maximum number of participants:  Adults: Click here to enter text. Children: Click here to enter text. | | | |
| Which children/ families will benefit from this project? Please check all the boxes that apply.    Children/ Parents of children:  0-2 years  2-4 years  4-6 years  all the children in the community | | | |
| What kind of family literacy project will this be? Please check all the boxes that apply.  1-2-3 Rhyme with Me  Storytime Adventures  Books in the Home  Little Chefs  Storysacks  Science Fun  Other: Click here to enter text. | | | |
| Please briefly describe your project. Click here to enter text. | | | |
| **Your partners** | | | |
| Please list your partners and what they will do for the project. I.e. Daycare – will donate space for the program.  Click here to enter text. | | | |
| **Submit your application** | | | |
| If you need help with your application or have any questions, please contact us by phone, fax or E-mail. Return your form to: | | | |
| **NWT Literacy Council**  **Box 761**  **Yellowknife, NWT**  **X1A 2N6** | | **Phone: 1-867-873-9262**  **Toll free : 1-866-599-6758**  **Fax: 1-867-873-2176** E-mail: [katie@nwtliteracy.ca](mailto:katie@nwtliteracy.ca) | |

#### Here is an example budget for a 6 week 1-2-3 Rhyme with Me Program

|  |  |  |  |
| --- | --- | --- | --- |
|  | **Total** | **In Kind** | **Request** |
| **Space** |  |  |  |
| The location of your program should be free or available for a small donation | 400.00 | 400.00 |  |
|  | | | |
| 2 facilitators x $200.00 each  (Your facilitators may be volunteers, or their salaries may be covered by another program) | 400.00 |  | 400.00 |
|  | | | |
| **Snacks**: coffee juice, snacks, cups, etc.  $30.00 per week x 6 weeks  (You may be able to get snacks donated by your local store) | 180.00 |  | 180.00 |
| **Client Transportation** - taxis  (This may not be necessary if your agency has transportation available or if the participants do not need it). | 200.00 |  | 200.00 |
| **Childcare –** $20 per week x 6 weeks | 120.00 |  | 120.00 |
| **Photocopying** of rhymes, flyers, poster and pamphlets | 180.00 | 180.00 |  |
| New Program Costs | | | |
| A new program takes extra time to organize.  It’s important to allow for this cost.  (Approx. $300 - $500) | 300.00 |  | 300.00 |
| Total | $1780 | $580 | $1200 |

Please fill in **ONE** of the following budget forms: The one on this page or the one on page 6.

|  |  |  |  |
| --- | --- | --- | --- |
| **Budget** | **Total** | **In Kind** | **Request** |
| **Space** |  |  |  |
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|  |  |  |  |
| Salaries and Honoraria | | | |
|  |  |  |  |
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| Materials and Supplies | | | |
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| Other Costs (please list) |  |  |  |
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| **Total** |  |  |  |

|  |  |  |  |
| --- | --- | --- | --- |
| **Budget** | **Total** | **In Kind** | **Request** |
| **Space:** |  |  |  |
| $ \_\_\_\_\_\_\_ per week x \_\_\_\_\_\_\_ weeks |  |  |  |
| Salaries and Honoraria: | | | |
| Program planning, preparation and delivery:  Number of facilitators x $ \_\_\_\_ /hour x \_\_\_ weeks |  |  |  |
| Supplies and Refreshments: | | | |
| **Snacks**: coffee juice, snacks, cups, etc.  $ \_\_\_\_\_\_ per week x \_\_\_\_\_\_ weeks |  |  |  |
| **Client Transportation** (taxis)  $ \_\_\_\_\_\_ per week x \_\_\_\_\_\_ weeks |  |  |  |
| **Childcare**  $ \_\_\_\_\_\_ per week x \_\_\_\_\_\_ weeks |  |  |  |
| **Photocopying** of program materials  $ \_\_\_\_\_\_ per week x \_\_\_\_\_\_ weeks |  |  |  |
| Materials: purchase of books etc. \_\_\_\_\_ books x \_\_\_\_\_ participants x $ \_\_\_\_\_/ book |  |  |  |
| Advertising: flyers, pamphlets, etc. \_\_\_\_\_\_ sets of pamphlets x $ \_\_\_\_\_\_/ set  \_\_\_\_\_\_ flyers x $ \_\_\_\_\_\_ /flyer |  |  |  |
| Supplies: craft supplies etc. \_\_\_ \_\_\_\_\_\_\_\_\_\_ x $ \_\_\_\_\_\_  \_\_\_ \_\_\_\_\_\_\_\_\_\_ x $ \_\_\_\_\_\_  \_\_\_ \_\_\_\_\_\_\_\_\_\_ x $ \_\_\_\_\_\_ |  |  |  |
| Other Costs (please list) |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
| **Total** |  |  |  |