



Town of Edson Community & Protective Services Transportation Grant

GRANT APPLICATION OVERVIEW

When people are included and participate in their community, good things happen. We believe in supporting transportation opportunities so individuals experiencing transportation barriers can be actively engaged in community life.

The objective of this program is to:

- Help individuals maintain independence
- Help people feel a sense of belonging in their community
- Improve quality of life (attend appointments, social outings, shopping, etc.)

Funding under this program is available to non-profit organizations to provide public transportation and/or accessibility to public buildings for seniors, vulnerable individuals and persons with disabilities.

Please contact Tanya Byers at Community and Protective Services at 780-723-8613 should you have any questions.

The Town of Edson Community and Protective Services Department will be accepting applications for the Transportation Grant until Wednesday, July 20th, 2022.

QUESTIONS?

Contact:

Tanya Byers
Community & Protective Services
Town of Edson
Phone: 780 723 8613
Email: tanyab@edson.ca

HOW TO SUBMIT AN APPLICATION

Return completed application to:

Community & Protective Services
Town of Edson
PO Box 6300, 605 – 50th Street
Edson, AB, T7E 1T7

Or email: cserv@edson.ca

GRANT ELIGIBILITY & GUIDELINES

1. Applicants are encouraged to contact the Town of Edson Senior Manager of Community Services at 780-723-8613 prior to applying to discuss your project and determine eligibility.
2. Applications are reviewed and grants are awarded once a year.
3. If you received this grant in 2021 financial accounting of how Town funds were spent and a transportation services summary must be submitted with your application.

Each application will be evaluated holistically on its own merits, considering whether the applicant has demonstrated:

- A clearly defined need for support
- The capacity to provide accessible, affordable transportation services
- A plan for sustainability of the service (if applicable), impact and organizational capacity
- The program or event is to benefit Edson residents. These benefits may include but are

not limited to:

- Increased independence
- Increased sense of belonging
- Enhanced access to participation in community life and medical appointments

NOTE

- Applicants who have previously received any type of grant funding from the Town of Edson but have not submitted a requisite financial accounting for the grant(s) will not be eligible for funding under this program until all outstanding accounting requirements have been met.
- Retroactive funding will not be considered.
- Applicants must provide recognition of the Town of Edson's contribution to the Transportation services. Proper logos will be available to all applicants.
- Due to limited funds grant funding awarded may be less than that sought by the applicant(s) and not all organizations meeting the established criteria will obtain funding.

SECTION A: ORGANIZATION/AGENCY INFORMATION

CONTACT INFORMATION

Name of Society or Special Interest Group	
Street Address	
Mailing Address	Postal Code
Contact Person	Position
Phone Number	Fax Number
Email Address	
Are you a non-profit organization? <input type="checkbox"/> YES <input type="checkbox"/> NO	If yes, please provide your registration number:

GRANT REQUEST INFORMATION

Please provide a brief description of the transportation needs served by your organization:

Please indicate if you are able to provide evening and weekend transportation for seniors and persons with disabilities. If not, what are the barriers?

Amount Requested: _____

A description of how you propose to use the funds you are requesting in this application:

Please provide the # of KM traveled in the Last Year and a description of the types of services provided and general demographics of the clients you served.

Please provide a list of your Board of Directors and their contact information.

Please provide any additional information that will help Community and Protective Services better understand your organization's needs.

SECTION B: PAST PARTICIPATION & FINANCIAL INFORMATION

PAST PARTICIPATION

Did you receive the Transportation Grant from the Town of Edson in 2021? YES NO

Please provide a financial statement showing how last year's Transportation Grant was expended by your organization.

FINANCIAL INFORMATION

Please provide a copy of your organization's financial statement as filed under your last annual Alberta Societies Act Report.

Please provide a copy of your budget for this year which will show how you intend to use the funds you are requesting, as well as other funds you plan to raise. Please explain how COVID-19 has impacted your fundraising efforts.

APPLICANT AGREEMENT (Sign and keep a copy for your records)

I declare that:

- I am a duly authorized representative having legal, financial and/or executive signing authority for the above noted organization.
- The information provided within this application form and supporting documentation is true, accurate and endorsed by the above organization.
- I am aware that the information provided in this application may be available to the public.
- The project will benefit the general community and not specific individuals/families.
- A Final Budget Report indicating the service’s expenses and revenue will be provided to the Town of Edson after execution of the service. Please see the grant approval letter for grant submission deadline.
- I understand that an overdue or outstanding Final Budget Report may affect future applications.
- Other obligations of this grant include, but are not limited to, provision of adequate insurance, risk management and Occupational Health and Safety systems. All relevant public health and safety practices must be followed.
- The contribution from the Town of Edson will be recognized through any publications, advertising or other suitable means. Please contact the Town of Edson Community and Protective Services office to receive a copy of our logo.

Signature: _____ Date: _____

Print Name: _____ Position: _____