

APPLICATION FORM

**Support for Innovation
Promotion of Linguistic Duality Component
Enhancement of Official Languages Program
Official Languages Support Programs Branch**

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APPLICATION FORM

Support for Innovation

**Promotion of Linguistic Duality Component
Enhancement of Official Languages Program
Official Languages Support Programs Branch**

APPLICATION FORM: Support for Innovation

IMPORTANT: Once completed, this form can be transmitted electronically by e-mail.

PART A	
1. Organization's Official Name	
2. Former name (if applicable)	
3. Telephone	
4. Fax	
5. E-mail	
6. Web Site	
7. Mailing address	
8. Head Office Address (If different from mailing address)	
9. Contact person	
9a. Name	
9b. Language of communication	French [] English []
9c. Telephone	
9d. Fax	
9e. Cellular	
9f. E-mail	



10. Organization's Governance
10a. Members of the Board of Directors or Other

Name and title	Elected Yes [] No []	Date elected	Year	Month	Day
	Appointed Yes [] No []	Date appointed			
			Year	Month	Day
	Member of executive Yes [] No []				
Address					
Telephone	Fax	E-mail			

Name and title	Elected Yes [] No []	Date elected	Year	Month	Day
	Appointed Yes [] No []	Date appointed			
			Year	Month	Day
	Member of executive Yes [] No []				
Address					
Telephone	Fax	E-mail			

Name and title	Elected Yes [] No []	Date elected	Year	Month	Day
	Appointed Yes [] No []	Date appointed			
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	Member of executive Yes [] No []				
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Member of executive Yes [] No []					
Address					
Telephone	Fax	E-mail			

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			Year	Month	Day
Member of executive Yes [] No []					
Address					
Telephone	Fax	E-mail			

Name and title	Elected Yes [] No []	Date elected			
			Year	Month	Day
	Appointed Yes [] No []	Date appointed			
			Year	Month	Day
Member of executive Yes [] No []					
Address					
Telephone	Fax	E-mail			


Name and title	Elected Yes [] No []	Date elected			
			Year	Month	Day
	Appointed Yes [] No []	Date appointed			
			Year	Month	Day
Member of executive Yes [] No []					
Address					
Telephone	Fax	E-mail			

Name and title	Elected Yes [] No []	Date elected			
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			Year	Month	Day
	Member of executive Yes [] No []				
Address					
Telephone	Fax	E-mail			

Name and Title	Elected Yes [] No []	Date Elected			
			Year	Month	Day
	Appointed Yes [] No []	Date Appointed			
			Year	Month	Day
	Member of Executive Yes [] No []				
Address					
Telephone	Fax	E-mail			

Name and Title	Elected Yes [] No []	Date Elected			
			Year	Month	Day
	Appointed Yes [] No []	Date Appointed			
			Year	Month	Day
	Member of Executive Yes [] No []				
Address					
Telephone	Fax	E-mail			

Name and Title	Elected Yes [] No []	Date Elected			
			Year	Month	Day
	Appointed Yes [] No []	Date Appointed			
			Year	Month	Day
	Member of Executive Yes [] No []				
Address					
Telephone	Fax	E-mail			

 11. **Attach the minutes** of the last Annual General Meeting

12. Organization's Mandate (as per the Constitution and By-laws)

12a. Main Geographical Scope (as per the Constitution and By-laws)			
<input type="checkbox"/> International	<input type="checkbox"/> National	<input type="checkbox"/> Interprovincial/Interterritorial	
<input type="checkbox"/> Provincial/Territorial	<input type="checkbox"/> Regional	<input type="checkbox"/> Municipal	<input type="checkbox"/> Local

13. Status			
<input type="checkbox"/>	Unincorporated		
<input type="checkbox"/>	In the process of incorporation	Date of application	
			Year
			Month
		Day	
Attach a copy of application to incorporate			
<input type="checkbox"/>	Federal Registration N°	<input type="checkbox"/> Provincial/Territorial Registration N°	
13a. Date of incorporation			
		Year	Month
		Day	

13b. The Certificate of Incorporation has been submitted to Canadian Heritage If not, attach a copy of the Certificate of Incorporation	Yes <input type="checkbox"/> No <input type="checkbox"/>
13c. Changes have been made to the Certificate of Incorporation since it was submitted to Canadian Heritage If so, attach a copy of the Certificate of Incorporation	Yes <input type="checkbox"/> No <input type="checkbox"/>

13d. The Constitution and By-laws have been submitted to Canadian Heritage	Yes [] No []
If not, attach the organization's Constitution and By-laws	
13e. The Constitution and By-laws were amended during the last fiscal year	Yes [] No []
If so, attach the new Constitution and By-laws approved by the organization	

13f. Charitable organization		Yes [] No []		
If so, enter the Canada Customs and Revenue Agency registration number	Registration N°			
Date of registration				
	Year	Month	Day	
In the process of registering Yes [] No []				
Date of application				
	Year	Month	Day	

14. Documentation on activities

14a. Attach the following documents:

Signed financial statement/audited financial statement for the last fiscal year

Updated operational budget for the current fiscal year

14b. Note: The applicant must provide any further information required by the program (see call letter).

15. Affiliations with other organizations	Yes [] No []
If so, which ones?	

16. Financial information

16a. Date of fiscal year	From				To		
		Month	Day			Month	Day

PART B -


17. Title

17a. Duration	From				To			
		Year	Month	Day		Year	Month	Day

18. Description - Summary (one page)


	April 1	Year	T o	March 31	Year	April 1	Year	T o	March 31	Year	TOTAL
18a. Expenses	\$					\$					\$
18b. Amount requested from Canadian Heritage	\$					\$					\$

18c. Complete and attach APPENDIX A.



PART C - SUPPORT

19. Financial or other support and sources

 Attach appropriate documentation (letters confirming the nature/amount of support)

Person's name and title	Organization	Telephone	Description of support

PART D - CONDITIONS

Departmental funding may be used only for the purposes specified in this application. Once the Department has agreed to grant financial assistance, no major change can be made to the project without Departmental approval (in each case, the Department shall determine what constitutes a major change). Funds not used for these purposes must be returned to the Department.

The organization bears full responsibility for its debts. The Department will not consider any request for assistance in settling costs.

The organization must agree to comply with all provincial and federal legislation.

The Department's financial contribution must be explicitly acknowledged and must be mentioned in publications funded by the Department. A typical form of acknowledgement is: "We acknowledge the financial support of the Department of Canadian Heritage".

With regard to the project or programming for which funding is requested, the organization shall agree to comply with the spirit and intent of the *Official Languages Act* by implementing the appropriate linguistic measures.

By signing this application, the organization authorizes the Department of Canadian Heritage to disclose any information received in this application within Canadian Heritage and the Government of Canada or to outside entities for the following purposes: to reach a decision on this application, to administer and monitor the implementation of the project or programming, or to evaluate the results of the project or programming and this program after project completion. This disclosure of any information received in this application may also be used to reach a decision on any other application of the applicant for funding under any other PCH program.


In the event of an access to information request regarding the present funding application or any other information about the organization in the Department's possession, the information provided to the Department will be treated in accordance with the *Access to Information Act* and the *Privacy Act*. Where funding is approved, however, the amount of funding, the purpose for which the funds were granted and the name of the organization receiving the funding are considered public information.

Any person lobbying on the recipient's behalf must be registered under the federal *Lobbyists Registration Act*.

PART E

- I declare that
- X the information contained in this application is accurate and complete;
 - X this application is made on behalf and with the approval of the organization whose name appears on page one;
 - X this organization undertakes, if financial assistance is granted, to provide financial statements and reports on results pursuant to the requirements of the Department of Canadian Heritage;
 - X this organization commits, if financial assistance is granted, to agree to the assessment of the funded activity(ies) pursuant to the requirements of the Department of Canadian Heritage.

20. Name(s) of person(s) authorized to sign

 Attach authorization

Signature		Title	
Signature		Title	
Date			

APPENDIX A

TEMPLATE FOR FUNDING APPLICATIONS

To be completed:

Table 1 - Description

Table 2 - Revenues and Expenses

Please refer to the Guide

APPENDIX A: TABLE 1, DESCRIPTION

Organization's name:	Title:	From				To			
			Year	Month	Day		Year	Month	Day

Situation	
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Desired outcomes (3 to 5 years)	
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Links with the Official Languages Support Programs Results-Based Management and Accountability Framework	
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Links with the Promotion of Linguistic Duality component objectives	
----------------------------------------------------------------------------	--

Results achieved to date	
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Targeted Direct Results	Performance Indicators	Activities (in order of priority)	Schedule	Resources required

Please refer to the Guide

APPENDIX A: TABLE 2, REVENUES AND EXPENSES

Organization's name:	Title:	From				To			
			Year	Month	Day		Year	Month	Day

EXPENSES		SOURCES OF REVENUE						
Expense Categories	Required Financial Resources	Amount Requested from Canadian Heritage	Other (describe)			Organization's Financial Contribution	In-Kind	TOTAL
			Source 1	Source 2	Source 3			
Salaries								
Honoraria								
Travel								
Publicity								
Operational costs								
Other (describe)								
In-kind								
TOTAL	\$	\$	\$	\$	\$	\$	\$	\$

APPENDIX B

REFERENCE: T.B. 806325

Conflict of Interest

REFERENCE: T.B. 806325 - Conflict of Interest

To enhance public confidence in the integrity of public office holders and the public service, the government has issued the Conflict of Interest and Post Employment Code for Public Office Holders. In order to ensure that safeguards are in place to prevent conflict of interest by former public office holders, applicants for contributions shall provide answers to the contributor on the following questions:

Do you presently employ, in your organization, a former public office holder who left the federal government in the last twelve months and who was at an SM (senior manager) level or above while in public office?

Yes [] No []

If you have answered yes to this question, would you please ask that the employee contact his/her former department to obtain written confirmation that he/she is in compliance with the post-employment provisions of the Conflict of Interest and Post-Employment Code. Such confirmation must be provided to the contributor.

Organization	
Signature	
Name in Print	
Title	
Date	

APPENDIX C

CHECKLIST

CHECKLIST

TO BE FILLED OUT BY THE APPLICANT	
Check off documents attached to this application by the organization	
	Minutes of the last Annual General Meeting
	Copy of the Application to Incorporate (if applicable)
	Copy of the Certificate of Incorporation (if applicable)
	Constitution and By-laws of the organization (if applicable)
	Signed financial statement/audited financial statement for the last fiscal year
	Updated operational budget for the current fiscal year
	Additional information required by the program (see call letter)
	Documentation related to financial assistance and other support
	Authorization to sign for the organization
	APPENDIX A: Template for funding applications (Tables 1 and 2)
	APPENDIX B: Reference T.B. 806325 - Conflict of Interest
	APPENDIX C: Checklist

TO BE FILLED OUT BY THE DEPARTMENT OF CANADIAN HERITAGE	
Check off documents received by Canadian Heritage	
	Minutes of the last Annual General Meeting
	Copy of the Application to Incorporate (if applicable)
	Copy of the Certificate of Incorporation (if applicable)
	Constitution and By-laws of the organization (if applicable)
	Signed financial statement/audited financial statement for the last fiscal year
	Updated operational budget for the current fiscal year
	Additional information required by the program (see call letter)
	Documentation related to financial assistance and other support
	Authorization to sign for the organization
	APPENDIX A: Template for funding applications (Tables 1 and 2)
	APPENDIX B: Reference T.B. 806325 - Conflict of Interest
	APPENDIX C: Checklist

APPENDIX D

REPORT ON RESULTS

REPORT ON RESULTS

Organization's name:	Title:							
Name of Contact Person:	Telephone:							
Duration of Activity(ies):	From				To			
		Year	Month	Day		Year	Month	Day

Activity Component	Targeted Direct Results	Performance Indicators	Summary of Activities Achieved	Data Sources and Collection Method	Assessment of Results Achieved

Signature	
Title	
Date	