



May 22, 2015

To Whom It May Concern:

As your organization applied for Joint Council funding for 2015, you are invited to submit an application for funding for 2016. Please find enclosed the application form. Please note, this will be the only opportunity for Joint Council funding for 2016. Only applications received on the prescribed application form will be considered. Applications are to be received **no later than September 9, 2015**.

Both Councils and the Province also fund Family and Community Support Services (FCSS), who have a very specific mandate on the types of projects they can fund. To maximize the use of FCSS funds you are asked to evaluate your project with FCSS criteria before applying for Joint Council funding. Contact David Green at (403) 627-3156 (Town of Pincher Creed Administration Office) for further information on FCSS funding.

Completed applications can be returned to the MD of Pincher Creek No. 9 Administration Office located at 1037 Herron Avenue, by mail to P.O. Box 279, Pincher Creek, AB T0K 1W0, by fax to 403-627-5070 or by e-mail to info@mdpinchercreek.ab.ca.

Should further information or clarification be required, please do not hesitate to contact us.

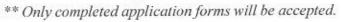
Sincerely,

Town of Pincher Creek and MD of Pincher Creek Joint Funding Committee



Joint Council Funding

Application Form





Name:	Contact Person:	
g Address:		
Number:	E-mail Address:	
Question	Answers	
Description of your project or reason you are applying for funding:		
Amount Requested:		
Do you qualify for FCSS?		
If not, why? Is so, how?		
Latest Year End Financial Statements.	Attach	
Budget Report- funding year and previous year.	Attach	
	Amount Requested: Do you qualify for FCSS? If not, why? Is so, how? Latest Year End Financial Statements. Budget Report- funding	



Joint Council Funding Application Form



** Only completed application forms will be accepted.

7	General purpose and objectives of your organization.	
8	What are the benefits of your organization to our community?	
9	Does your organization have a Youth and/or Seniors component? Please elaborate.	



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10	Explain how the proposed project/service does not duplicate other project/services in the community.	
11	Indicate percent of your project's revenue budget that is dependent on this grant.	
12	Did you receive funding through the Joint Funding process last year? If so, was the project completed? Attached proof (pictures/budget sheet).	
13	Indicate how often you have requested and been provided with Council grants and the amounts received.	



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14	What other sources of revenue are you pursuing and for what projects?	
15	If the Councils do not provide total funds requested, can you complete the project?	
16	How many volunteer hours are anticipated for this project? And how are volunteers utilized?	
17	What are your organizations' accomplishments over the past 2 years?	



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18	Your organization primarily serves the needs of residents of the Town of	
	Pincher Creek (T), the Municipal District of Pincher Creek #9 (MD), Cowley (C), or Other (O).	T MD C O
19	Any other relevant information you would like to provide.	
103' info	7 Herron Avenue, via mail to B	arned to the MD of Pincher Creek No 9 Administration Office located at Box 279 Pincher Creek, Alberta T0K 1W0, fax to 403 627-5070 or e-mail to e call the MD Office at 403 627-3130 should further information or