

DISCRETIONARY GRANT POLICY
Council Policy No. 87/19

PURPOSE:

To establish a policy for the City of Fort St. John Council to deal with requests for Discretionary Grants.

POLICY:

In granting financial assistance to an organization for a discretionary Grant, the City will take in to account the following objectives:

1. For budgetary preparation purposes \$10,000 will be budgeted annually in the Base Budget for Discretionary Grants.
2. The primary purpose of a discretionary grant is to provide financial assistance to an organization for a specific capital project or an event that benefits the residents of the City of Fort St. John. The City is a member of the Peace River Regional District (PRRD) and collects regional district taxes from City taxpayers each year. When the PRRD provides a grant to a non-profit organization, the City contributed towards this grant through the PRRD. To avoid duplication, the City will coordinate grant applications with the PRRD. This will ensure that the City's contribution is made either through the PRRD or through Council.
3. The applicant organization should be registered as, or belong to a parent Society under the laws of British Columbia and / or Canada.
4. Preference will be given to an organization that benefits the Greater Fort St. John community.
5. Priority may be given to the following categories:
 - a. Family
 - b. Youth
 - c. Disabled
 - d. Adult
 - e. Size of Group

Note: Umbrella Groups will take priority over individual organizations. Individual groups are encouraged to apply through their Umbrella Group.

6. Priority for capital projects and events hosted in our community may be given to the following categories:
 - a. National Events
 - b. Provincial Events
 - c. Regional Events
 - d. Local Events

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POLICY: (continued)

This policy does not apply to grants funded by the Base Budget Grants policy nor

- a. Major Sponsorships (Air Show, NRA, etc.)
- b. Minor Sponsorships (Receptions, Luncheons, Dinners, etc.)
- c. Requests for Promotional Items (Pins, T-Shirts, etc.)

PROCEDURE:

1. The application form for a discretionary grant is attached to the policy
2. A representative of the organization making the grant request must be willing to present the request to Council if necessary.
3. The application in its entirety may be placed in a Council agenda.
4. At the discretion of Council, decisions pertaining to the approval of the discretionary grant requests may be made at the same meeting as the request is presented, however the Council decision will not be made in front of the delegation, or Council may choose to postpone the decision until a later date.
5. Requests for financial assistance must be approved by an affirmative vote of at least two-thirds of all Council Members.

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DISCRETIONARY GRANT APPLICATION

Date: _____ Date Received: _____

GENERAL INFORMATION			
Official Name of Non-Profit Organization			
Mailing Address	City	Province	Postal Code
SOCIETY INFORMATION			
Society Registration Number	Charity's BN (Business Number) / Registration Number <i>(the number the organization puts on charitable donation receipts)</i>		
SOCIETY EXECUTIVE – ATTACH LIST IF MORE ROOM IS NECESSARY			
Title	Name	Phone Number	
LOCAL CONTACT INFORMATION OF PERSON COMPLETING APPLICATION FORM			
Contact Name			
Mailing Address	City	Province	Postal Code
Work Telephone	Home Telephone	Cell Telephone	Email Address
GRANT APPLICATION			
<input type="checkbox"/> New Grant Application	<input type="checkbox"/> Application for Project Previously Funded by the City	<input type="checkbox"/> Applied for a PRRD Community Organization Special Event Grant for same project	

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ORGANIZATION INFORMATION		
Describe the purpose of your organization:		
User Statistics		
1. _____ The number of persons that are served by your organization annually.		
2. _____ The number persons who are residents of the City of Fort St. John.		
Is the organization run by volunteers, paid staff or a combination of both?		
1. _____ the number of volunteers and _____ the number volunteer hours worked per year.		
2. The number of paid staff, their titles and number of paid hours per year.		
Number	Title	Paid Hours Per Year

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DECLARATION

I hereby declare that the statements and information contained in the material submitted in support of this application are to the best of my belief true and correct in all respects.

I hereby agree to indemnify and save harmless the City of Fort St. John and its employees against all claims, liabilities, judgments, costs and expenses of whatsoever kind which may in any way occur against the said City and its employees in consequence of and incidental to, the granting of this exemption, if issued, and I further agree to conform to all requirements of the applicable bylaw and all other statutes and bylaws in force in the City of Fort St. John.

Signature of Applicant

Date

The personal information on this form is collected for the purpose of considering a specific capital project or an event that will benefit the residents of the City of Fort St. John as noted in Section 26(c) of the *Freedom of Information and Protection of Privacy Act*. Please note that the information will only be used for the purposes of evaluating this application and that your response will be treated as public information. If you have any questions about the collection and use of this information, please contact the Freedom of Information Coordinator at 250 787 8150.

SEND APPLICATIONS TO

CITY OF FORT ST. JOHN
10631 – 100TH STREET
FORT ST. JOHN, BC V1J 3Z5