

**2021 Application Form**

All sections of this application must be completed. No other format will be accepted. Please refer to the *2021 Information for Applicants* document for guidance with application writing and submission.

Personal information on this form is collected under section 31(C) of the Freedom of Information and Protection of Privacy Act R.S.P.E.I. 1988, c.F-15.01 as it relates directly to and is necessary for the Wildlife Conservation Funds Program and will be used to administer this program. If you have any questions about this collection of personal information, you may contact the administrator of the WC Fund, Island Nature Trust. Information may be verified.

# FUNDING ROUND: Spring \_\_\_\_ Fall \_\_\_\_

# SECTION 1.0: APPLICANT INFORMATION

|  |  |
| --- | --- |
| Name of Organization: |  |
| Contact Person (Name, Title): |  |
| Mailing Address: |  |
| Website Address: |  |
| Telephone: |  | Email: |  |
| Type of Organization (check all that apply): |
| Registered Charity \_\_\_\_\_\_ | Not-for-profit \_\_\_\_\_\_\_ | Incorporated \_\_\_\_\_ |
| Number of members: | Canada Revenue Agency #: |

## Background on Applicant

|  |  |
| --- | --- |
| Year of incorporation or establishment: |  |
| Mission / Vision statement(s) if applicable: |
|  |
| Previous accomplishments (*limit to 150 words*): |
|  |

# SECTION 2.0: PROJECT INFORMATION

## 2.1 Project Title

(*limit to no more than 9 words*)

## 2.2 Type of Project & Location

|  |  |
| --- | --- |
| *choose* ***only one*** *project type*  | *describe the geographic location* |
| Habitat Restoration or Enhancement |  |  |
| Natural Areas |  |  |
| Education |  |  |
| Research or Monitoring |  |  |
| Other (specify type & location) |  |  |

## 2.3 Timeline for Project

|  |  |
| --- | --- |
| Start Date: | End Date: |
| Is this a multi-year application? (***only research projects are eligible***) |  |

## 2.4 Benefit of Project to Wildlife

|  |
| --- |
| How does your project benefit wildlife? (*limit to 10 lines*) |
|  |

##  2.5 Project Goals

|  |
| --- |
| Project Purpose: (*limit to one sentence*) |
|  |
| List of Goals: (*describe the project goals in broad strokes, remembering that you will be reporting on them in your final report so they should be achievable within the timeframe for this award)* |
|  |

## 2.6 Proposed Activities and Anticipated Results

| Proposed Activity | Anticipated Result (Measure of Success) | Timeline |
| --- | --- | --- |
| *Ex., plant trees & shrubs (habitat), take grade 4 classes to forests (education), track salmon with pit tags (research)* | *Ex., 500 trees planted & protected against grazers, 130 grade 4 students experience forest ecology, 25 salmon tagged & tracked* | *Ex., May 1 – Jun 1* |
| NOTE: proposals that ask for funds to build bridges, restore impoundments, create fishways or construct other wildlife structures will need to show that a permit is in place for the work prior to applying to WCF |  |  |
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## 2.7 Communication Strategy

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| *Informing Islanders who finance this fund is a requirement of every WCF award. Describe how you will* ***(1)*** *share with the public the benefits your project provided to wildlife and* ***(2)*** *acknowledge the financial contribution of WCF.* |
|  |

# SECTION 3.0: FINANCIAL INFORMATION

# Complete all sections, ensuring all columns are tallied in the sub-total and total boxes. Applications with incomplete financial information will not be considered; that includes expense details (wage rates, mileage rates, etc.). As an alternative, you may choose to provide this financial information using the separate Excel financials template available to applicants from the administrator.

## 3.1 Project Expenses

|  |  |  |  |
| --- | --- | --- | --- |
| Description of Labour Costs(*must include # people, #hrs, $/hr*) | Total Cost | Request from WCF | Partner Support |
| **Cash** | **In-Kind**  |
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| Labour Sub-totals |  |  |  |  |

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| --- | --- | --- | --- |
| Description of Material & Supplies Costs(*must include # items, $/item*) | Total Cost | Request from WCF | Partner Support |
| **Cash** | **In-Kind**  |
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| Material & Supplies Sub-totals |  |  |  |  |

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| --- | --- | --- | --- |
| Description of Professional & Contractor Services Costs (*must include #hrs, $/hr*) | Total Cost | Request from WCF | Partner Support |
| **Cash** | **In-Kind**  |
| QUOTES REQUIRED |  |  |  |  |
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| Professional & Contractor Services Sub-totals |  |  |  |  |

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| --- | --- | --- | --- |
| Description of Travel & Communications Costs (*must include #km, 0.42/km, etc.*) | Total Cost | Request from WCF | Partner Support |
| **Cash** | **In-Kind**  |
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| Travel & Communications Sub-totals |  |  |  |  |

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| --- | --- | --- | --- |
| Description of Administration / Overhead Costs (*partner funds only, not eligible for WCF*) | Total Cost | Request from WCF | Partner Support |
| **Cash** | **In-Kind**  |
| THIS SECTION MUST BE FILLED IN |  | 0 |  |  |
|  |  | 0 |  |  |
|  |  | 0 |  |  |
|  |  | 0 |  |  |
| Administration Sub-totals |  | **0** |  |  |

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| --- | --- | --- | --- |
| Description of Other Costs | Total Cost | Request from WCF | Partner Support |
| **Cash** | **In-Kind**  |
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| Other Costs Sub-totals |  |  |  |  |

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| --- | --- | --- | --- |
|  | Total Cost | Request from WCF | Partner Support |
| **Cash** | **In-Kind**  |
| Grand Totals (Sum all sub-totals above) |  |  |  |  |
|  |  |  |  |  |
| Total Value of Project |  |
| Amount Requested from WCF |  |

## 3.2 Project Support from Other Partners

Include all anticipated and confirmed partners in this project, other than WCF. Your totals must match the partner support totals shown in the last table of 3.1 or the matching Excel financials file.

|  |  |  |  |
| --- | --- | --- | --- |
| Partner | Description of Project Support | Cash Support | In-kind Support |
| **Confirmed** | **Anticipated** | **Confirmed** | **Anticipated** |
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|  | **Total Values $:** |  |  |  |  |

Applications must be submitted:

* **by 5 pm Monday, February 1, 2021 for the Spring funding round**
* **by 5 pm Monday, October 4, 2021 for the Fall funding round**

Submission may be:

* in person, to the WCF Administrator, Island Nature Trust at 112 Longworth Avenue, Entrance off Esher Street, 2nd Floor, Charlottetown. Office hours are 8 am – 4 pm, Monday to Friday.
* by email, to info@peiwcf.ca
* by mail, to PEI Wildlife Conservation Fund, PO Box 265, Charlottetown, PE, C1A 7K4
* by fax, to 902-628-6331

Applications will not be accepted in any other format or at any other locations. Applications submitted late or which are incomplete will not be accepted.

Receipt of applications will be confirmed by the administrator. **If you do not receive confirmation of receipt, the application did not reach its destination**.