

Ktunaxa Citizens' Excellence Awards

GRANT APPLICATION FORM

I have read the GRANT APPLICATION GUIDELINES before I completed this application.

Individual Applicant

Applicant's Information

Name: _____

Mailing Address: _____

Primary Phone: _____

Email Address: _____

Group/Team Applicants

Group/Team Name: _____

Main Contact Name: _____

Mailing Address: _____

Primary Phone: _____

Email Address: _____

Details

Sport or Activity: _____

Club or Team Name: _____

Level achieved: _____

Brief description of request or need

Explain how the request supports your continued advanced level of success in your sport/activity? How will this sport/activity positively impact on your personal self-development in your pursuit of excellence? How might this opportunity reflect positively back on the Ktunaxa Nation as a whole?

Costs: *Must be completed*

Please list ALL costs required to complete your event/activity including travel

Expense	Amount
	\$
	\$
	\$
	\$
	\$
	\$
Total Costs	\$
Other Funding (please list the combined total of ALL other funding sources, confirmed or anticipated, for your event/activity)	\$
Amount Request (Total Costs less Other Funding)	\$

Letters of Support

Feel free to attach up to three letters or support if you have them.

Declaration:

In signing this application:

I/We confirm that the information contained in this application and the accompanying documents is true, accurate and complete. I understand that providing false or misleading information may disqualify me from receiving this grant now and in the future.

I/We agree that any pictures or materials submitted in regard to the voluntary reporting associated with this application, can be used for the purposes of the celebrating and promotion of the Ktunaxa Citizens' Excellence Awards.

Signature:

This application must be signed by the applicant. If the applicant is under the age of 18, a parent or legal guardian must sign on their behalf. If this application is for a team or group, the main contact person must sign the application.

Name: (please print)		
Signature:		Date: