# **Association Funds Account Application Form**

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| Area: |       |
|  |  |  |
| Details of staff person making this application: |  |  |
|       | / |       |  |  |
|  | (Name) | (position) |
|  |    /    / 20   |
| (Signature) | Date |

**Outline of Project, Service, or Activity** (purpose for the funding request):

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|       |
|       |
|       |
| How many people (service users) will benefit directly from the project, service, or activity?  |  |
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**Finance Details:**

|  |  |
| --- | --- |
| Amount Requested **(excluding GST)** | $      |
| List of individual items being applied for in priority order (if applicable):  |
| 1.       | $      |
| 2.       | $      |
| 3.       | $      |
| 4.       | $      |
| Other:       | $      |
| **Total** |  | $      |
| Has the project, service, or activity been funded before? | Y [ ]  N [ ]  |
| Does this application cover the full cost of the project, service or activity? | Y [ ]  N [ ]  |
| If no, please provide details of other funding sources:      |
|       |
|  |
| Two (2) written quotes are to be attached to this application form if the request involves the purchase of assets over $500 **(excluding GST)**  |

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| **Endorsement from IDEA Services Area Manager:**  |
| **Name:**  |  |
| *Signature:* |  | Date:    /    / 20   |

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| **Association Status:**  |
| *Please circle one* | **ACTIVE** | **IN RECESS** |

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| **Approval:**  |
| **Approved** *(please circle)* | **Yes** | **No** |
| *If no, please provide reason:* |       |

|  |  |  |
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| **Approved Association Chair***If Association is active and application less than $10,000* | *Signed:*  | Date:    /    / 20   |
| **Approved General Manager Corporate Services** *If Association is active or in recess and application less than $20,000* | *Signed* :  | Date:    /    / 20   |
| **Approved Chief Executive***If Association is active or in recess and application less than $50,000* | *Signed* :  | Date:    /    / 20   |
| **Approved IHC Board** *Applications over $50,000* | Board Minute attached **[ ]**  | Date of meeting:    /    / 20   |