

*Summer Village of Sandy Beach*  
**Family and Community Support Services (FCSS) Grant Funding**

Application Year: **January 1 to December 31, 20\_\_\_\_\_**

<b>Program Name:</b>	<b>GRANT AMOUNT REQUESTED</b> \$	<b>\$ GRANT AMOUNT AWARDED</b> \$
<b>Organization Information:</b>		
Organization Name:		
Mailing Address:		
Contact person:		Position/title:
Email address:		
Telephone:	Cell:	Fax:
Is your organization registered as a society or a corporation: <input type="checkbox"/> Yes <input type="checkbox"/> No		
Charitable Number:	Incorporation Number:	
Please provide a brief overview of your agency		

**Eligibility for Financial Support**

To be eligible, each proposed program or project must be managed by, or under the auspices of a community group or agency that is incorporated (or in the process of becoming incorporated) as a **non-profit society** in Alberta; or operating under the administrative jurisdiction of a school division or municipality.

**ONLY** applications that identify the Specific piece of the project or program that fits the FCSS Act and Regulation and identifies the Outcomes and

Indicators will be considered.

<b>Deadline Dates</b>		
<b>Applications for FCSS Grant Funding</b>	<b>October 15, 20_____</b>	<i>(for the upcoming year)</i>
<b>Please note A <i>Year End Summary</i> report must be submitted by:</b>	<b>January 31, 20_____</b>	<i>(of the following year)</i>

<b>Additional Organization Information:</b>	
Brief Description of your agency Mission, Mandate, History	
Funded by	Provincial Gov't   Federal Gov't   Other (please list all)
Reason why you need additional funding for this project	

<b>Program/Project Title:</b>	Children & Youth Program
<b>Statement of Need:</b> <i>What community need or issue does this program or project address?</i>	<p>Some children &amp; youth have been identified by teachers, parents, volunteers, community agencies and other community members as having difficulties with their social and emotional well-being.</p> <p>Observers identify the following:</p> <ul style="list-style-type: none"> <li>• Not feeling connected to their community</li> <li>• Acting out</li> <li>• Unhealthy behaviours, e.g., bullying, drug and alcohol use/abuse, sexual promiscuity</li> <li>• Limited resources related to relationship building</li> <li>• Social isolation/withdrawal</li> <li>• Failure to graduate</li> </ul>

	<p>These children &amp; youth may be dealing with:</p> <ul style="list-style-type: none"> <li>• Changing family circumstances: e.g., divorce, blended families, relocation</li> <li>• Lack of self-esteem</li> <li>• Lack of parental support</li> <li>• Adults lack of knowledge/understanding to respond effectively to children's needs</li> <li>• Conflicts with parents</li> </ul>
<p><b>Overall Goal:</b>  <i>What do you hope to achieve with the program or project [ overall change or impact in the long term]</i></p>	<p>Children &amp; Youth have the social and emotional well-being to manage life's challenges in a positive way.</p>
<p><b>Broad Strategy:</b>  <i>In general terms, how will the program or project address the community need?</i></p>	<p>To promote youths' positive social and emotional development by providing support, guidance, encouragement, tools and intervention strategies to the students, mentors, parents and community groups.</p>
<p><b>Rationale:</b>  <i>What evidence do you have that would support this approach, ie., if you do these things, then these results will occur? What is your "if/then statement?"</i></p>	<p>If support, guidance, encouragement, tools and intervention strategies are provided then:  1.) youth will have increased social skills, learn to address their emotional needs and develop more positive relationships with peers, teachers, community members and their parents;</p>
<p><b>Who is served?</b>  <i>What is the Target Group or population you want to reach with this program or project? (youth, seniors, adults etc.)</i></p>	<p>Children &amp; Youth ages:</p>
<p><b>Inputs :</b>  <i>Identify the specific resources you have available for this program or to complete the project.</i></p>	<p>Volunteers  Money  Program Materials  Information  Guest presenters</p>
<p><b>Outputs:</b> <i>Identify the specific Activities and processes you will use to work toward your program or project goals.</i></p>	<p>Group work supplemented by one on one activity as required including working with children and youth, families, and community as a whole</p> <ul style="list-style-type: none"> <li>• Interactive Activities that promote relationship building and self-esteem</li> </ul>

<b>Outputs:</b> <i>Who will you reach (students, volunteers, seniors etc.)</i>	<b>Must report to the province so please collect:</b>  # of participants # of volunteers # of volunteer hours related to this FCSS initiative  <b>If partners are involved:</b> # of partners List of Partners  <b>Consider collecting other information relevant to this program/project:</b> # of new participants # of individuals served by age category # of workshops/presentations offered # of various types of information requested, i.e., food bank, transportation, housing, health, safety-internet/telephone/door to door solicitors # of information and referrals
<b>FCSS Overarching Goal</b> <i>FCSS programs must be of a preventive nature that enhances the social well-being of individuals and families through promotion or intervention strategies provided at the earliest opportunity. How does this program or project contribute?</i>	FCSS enhances the social well-being of individuals, families and community through prevention.

Program Name	Outcome Statement:	Measures: Question On the Survey	Measures Bank Numbers:	Alignment with the FCSS Outcomes Model: Chart of Outcomes and Indicators:	Data to be collected and reported on the <u>Year End Summary Report after surveying</u>	Strategic Direction
Children & Youth Programming	Children and Youth develop positive identities	As a result of [insert name] I feel good about myself.	PM6/10	<b>INDIVIDUAL OUTCOME 3</b> <i>Children and youth develop positively.</i> <b>Indicator: Positive Identities</b> <b>DA# 38 Self Esteem</b>	<b>Total # of Children:</b> # completing the tool: # completing measure: # experiencing a positive change: % of positive change	<b>SD1 help people to develop independence, strengthen coping skills and become more resistant to crisis</b>

	Children and Youth feel a sense of belonging to their community	This program has helped me to feel like I belong in my neighbourhood/community.	PM1/PM4	<b>INDIVIDUAL OUTCOME 3</b> <b>Children and youth develop positively.</b> <b>Indicator: Support DA # 4 Caring Neighbourhoods</b>	<b>Total # of Children:</b> # completing the tool: # completing measure: # experiencing a positive change: % of positive change:	<b>SD3 help people to develop interpersonal and group skills which enhance constructive relationships among people</b>
	Children & Youth get along better with others	I get along with others	PM5/PM10	<b>INDIVIDUAL OUTCOME 3</b> <b>Children and youth develop positively.</b> <b>Indicator: Social Competencies</b> <b>DA # 33 Interpersonal skills</b>	<b>Total # of Children:</b> # completing the tool: # completing measure: # experiencing a positive change: % of positive change	<b>SD3 help people to develop interpersonal and group skills which enhance constructive relationships among people</b>

<b>PROPOSED BUDGET</b>		
<b>REVENUE:</b>		
Donalda FCSS Grant Funding	\$	
Other Funding Sources	\$	
	\$	
	\$	
Total Revenue:		\$
<b>EXPENDITURES:</b>		
Program/Project Materials	\$	
Speaker/Presenter Expenses	\$	
Advertising/Promotions	\$	
Telephone/Postage/copying	\$	
Facility Rentals	\$	
Other Costs: Nutritional expenses	\$	
Administration/Coordination	\$	
Program Coordinator & Rev Canada Remit [if applicable]	\$	
		\$
Total Expenditures		\$

Surplus (Deficit)		
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Declaration of Applicant	
<p>I/we do certify to the best of my/our knowledge that this application contains a full and correct account of all matters stated herein and complies <b>with the requirements and conditions set out in the Family and Community Support Services Act and Regulation.</b>  <b>(<a href="http://humanservices.alberta.ca/family-community/14876.html">http://humanservices.alberta.ca/family-community/14876.html</a>):</b></p>	
<p><b>I acknowledge that</b> should this application be approved, I/we will be required to enter into this funding agreement in its entirety.</p>	
Print Name	
Authorized Signature	
Date Signed	
Date submitted to Village of Donalda	
<p>Please keep a copy of this application for your records along with supporting financials. This report will coincide with the Year End Summary.</p>	

**Forward completed application to: Summer Village of Sandy Beach**

**Contact:** CAO

**Email:**

**Phone:**

FOR OFFICE USE ONLY	
Date Received:	\$ Amount Approved:
By Mail:	Date Approved:
By Email	Notes/Special requests or comments

	Future Recommendations