



## **Mid Island Co-op FAC Application Request for Funding & Sponsorship Support**

Thank you for your interest in obtaining financial support from **Mid Island Consumer Services Co-op**. Please know that while we may be unable to support each and every worthy application, we do take the time to fully study and consider each submission. We appreciate the efforts you will take to fully complete this application in a manner that will assist Mid Island Co-op's Community Relations Manager and the Board of Directors in their efforts to exercise the very best judgement when considering your request. The board of directors will always consider the image and community profile of your Co-op and the entire membership when approving funding applications.

**Organizational Criteria:** To receive funding, a request must come from a registered charity or incorporated non-profit society hosting services, activities or events supporting arts and culture, community service, education, environmental sustainability, social justice, health wellness, sports recreation, and or/youth. Mid Island Co-op will not provide funding individuals or partisan political organizations. Fraternal groups, grant making-foundations, for-profit entities, professional fundraising firms, and technical or professional organizations are not eligible for funding. The Co-op will consider applications for funding for amateur sport organizations, but will not fund individual players or teams.

**Funding Frequency:** Organizations that receive funding in three consecutive years shall be ineligible for funding in the following year. An organization receiving funds of \$1,000 or more may not apply for funding again in the same year. The Co-operative will not commit to multi-year funding agreements.

**Funding Criteria:** Organizations seeking funding must complete an application outlining the organization's compliance with the policy and outlining how the funds will be used. An organization's proposal must correspond with the following criteria; the activity, event or service must be offered within the Co-op's trading area; the object or form of the event, service or activity must no involve partisan or religious purposes or promotion - religious organizations may receive funding provided the service; the event or activity is offered on a non-demonstrational basis. **Funding must not be dedicated toward:** Conferences, private training sessions, tradeshow, meetings or retreats; trips and tours, including those of sports teams; private events for restricted membership; research project surveys; Corporate fundraising programs; Endowments; the creation of marketing or promotional materials such as books, videos, brochures or websites, debt servicing activities, wages, utilities and building upkeep.

Funding and sponsorship requests are considered on a tri-annual basis by the Funds Allocation Committee (Board Members), deadlines April 30, August 31 and December 31. Application package a maximum of 5 pages.

**Co-op Number (required):** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Organization:** \_\_\_\_\_ **Contact Name:** \_\_\_\_\_

**Telephone:** \_\_\_\_\_ **email:** \_\_\_\_\_

**Address:** \_\_\_\_\_ **City:** \_\_\_\_\_

**Postal Code:** \_\_\_\_\_ **Charitable Organization No.:** \_\_\_\_\_

Please tell the Co-op of your organization; what you do, goals, principles and how it is of benefit to our mid-island community etc.: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Are you affiliated with or do you receive funding from any other local or national groups, charities or organizations? Please explain if this applies to your group.  
\_\_\_\_\_  
\_\_\_\_\_

Event/Project Details for which funding is being requested: ( event name, date, location, purpose, number of people involved etc.): \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Is this a first time or an ongoing event? \_\_\_\_\_

If this project/event existed in previous years, who were your financial supporters, and what is their level of support this time? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Assistance Requested (cash, gas cards, support etc., **please be specific with the dollar amount**):  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

How and when will Mid-Island Co-op be recognized for their support? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Has your organization applied to Mid-Island Co-op prior to today? Y or N When? \_\_\_\_\_

Which other groups have you applied to for funding, and what is the status of those applications? (Attach a separate page if more space is required).

<u>Applied to:</u>	<u>Approved Y/N</u>	<u>Level of Support pledged or reason for decline:</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Please attach a copy of your most current operating budget **when applying for support over \$500.** Be sure to include information on Budgeted Revenue, Rent expense, Travel Costs, Staffing, and paid outside services to your organization. If a budget document is not available, please provide the following information: List the positions and salary amounts of staff employed by your organization if applicable. (Attach page if more space required). Please **do not include names** of any personnel.

<u>Position or Function</u>	<u>Annual Salary/Wage Cost</u>
_____	_____
_____	_____
_____	_____
_____	_____

Please advise if your organization uses or has recently used the services of outside contractors or paid, staff employees in a fund raising capacity.

\_\_\_\_\_  
\_\_\_\_\_

**Please return completed application to Your Co-op at:**

## **MID ISLAND CO-OP**

**Unit #103- 2517 Bowen Road, Nanaimo, BC V9T 3L2  
www.midisland.coop**

**Attention: Marketing & Community Relations Manager**

**Tel: 729 - 8400      Fax: 729 - 8426**

**Mid Island Co-op would like to thank you for your diligence in completing this application.**