



## Community Grants Application

Western Nova Scotia has derived economic, recreational, and ecological values from our forests for many generations. Communities near mills have always benefited from companies' contributions to local initiatives. WestFor is joining the forest sector's community support efforts through a Community Fund for projects and organizations in the counties where it operates. Each year, \$1 for every two tonnes of wood harvested in a county will be set aside to be distributed back into that county in the subsequent year. The focus of the Community Fund will be to provide support for child and youth programs, outdoor recreation and community infrastructure. Applications will be sought, and submissions will be reviewed by a committee comprised of a community representative from each of the counties benefiting from the Fund.

Funding will be considered for projects in the following counties:

1. Digby
2. Annapolis
3. Halifax
4. Hants
5. Kings
6. Queens
7. Shelburne
8. Lunenburg
9. Yarmouth

### Requesting Group Information

Name of Organization: \_\_\_\_\_  
Street Address: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_  
Email: \_\_\_\_\_ Telephone: \_\_\_\_\_

Name of organization Chairperson: \_\_\_\_\_  
Email: \_\_\_\_\_ Telephone: \_\_\_\_\_

Application Contact: \_\_\_\_\_  
Email: \_\_\_\_\_ Telephone: \_\_\_\_\_

Is the organization registered with the Nova Scotia Registry of Joint Stocks as a non-profit society or non-profit cooperative? Yes\_\_\_ No\_\_\_  
If yes, please provide your Nova Scotia Registry of Joint Stocks registration number: \_\_\_\_\_



**Project**

Project Title: \_\_\_\_\_  
Project Description, in about 100 words: \_\_\_\_\_

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Total Cost of Project: \_\_\_\_\_ Amount Requested\*: \_\_\_\_\_

Project Start Date: \_\_\_\_\_ Project End Date: \_\_\_\_\_

Location of Project: \_\_\_\_\_

Describe how the funds you are requesting will be spent: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\*If the amount requested is \$500 or greater, please attach a detailed budget for your project, including all income and expenses.

Are there volunteer opportunities available within your organization/charity/event? Yes \_\_\_ No \_\_\_

If yes, may we share volunteer opportunities within the company and community? Yes \_\_\_ No \_\_\_

May we share/advertise for your project on our social media outlets? Yes \_\_\_ No \_\_\_



**Organization Declaration:**

I hereby certify that I act as a duly authorized representative of the organization and confirm to the accuracy and completeness of the information contained in this application.

Name of Organization representative: \_\_\_\_\_ Date: \_\_\_\_\_

Title of Organization representative: \_\_\_\_\_

Signature of Organization representative: \_\_\_\_\_

Submit application to [communications@westfor.org](mailto:communications@westfor.org) by June 30, 2021.