

1. Applicant identification

# **FUNDING APPLICATION**

Please send the completed application by fax to 819-964-2711 or by email to the NRBHSS officer responsible for the theme of your activity.

Date of application:		Community		
Name:				
Job title:				
Organisation:				
Phone:		E-mail		
Address:				
2. Budget manage	ment			
Wich organisation will receive the money?	<ul><li>☐ Inuulitsivik Health</li><li>Center</li><li>☐ Tulattavik Health Center</li><li>☐ NV</li></ul>	☐ School ☐ Other:		
	ace.	nation letter to the organisation for all expenses related to the activity,		
Health promotion calendar event				
Activity title (optional)				
Goals (How will the activity contribute to well-being of the community?)				
Description of the Activity				
<ul> <li>When and where will the activity take place?</li> <li>What will happen during the activity?</li> <li>What will the</li> </ul>				
participants do or learn?				
How will you recruit participants?				
<ul><li>Wich artners will you</li></ul>				
work with? ■ Anything else we				
should know?				

Target population	☐ Children (6-12) ☐ Elder ☐ Teenagers (13-17) ☐ Pare		Adults (18-59) Elders (60+) Parents and caregivers	☐ Pregnant v☐ Women☐ Men	women 🗖 All	
How many people will participate?	<b>1</b> -15	<b>1</b> 6-30	<b>31-45</b>	46-60	<b>G</b> 60 +	
4. Budget						
List all the expenses that (For example: honorariu			•		Cost \$	
			Amount requested	from NRBHSS:		
Have you requested or received funding from other organisations?  If you answered yes, please list the other funders below:					☐ Yes☐ No	
			Total cost	of the activity:		
5. Signature & Aut  My immediate superviso  I understand that		ormed and	has authorised this a	application	☐ Yes	
NRBHSS will reimbu	rse the expense	es after the	activity took place.		☐ Yes	
<ul> <li>To receive reimbursement, all receipts must be sent to the NRBHSS agent before March 31st by mail, fax, or email.</li> </ul>					☐ Yes	
_			verify that funds are ect proposal (see pa			
Applicant signature				Date		

For further information call: 819 964-2222 / 1 844 964-2244



### Eligible Expenses

#### Eligible expenses include:

- ∞ Healthy store-bought or traditional food¹
- ∞ Cooking material (blender, pots, pans, etc.)
- ∞ Educational and early stimulation material for children (books, coloring books, toys, board games, educational videos, etc.)
- ∞ Baby supplies (bottle, diapers, formula, etc.)
- ∞ Prevention & promotion material (posters, pamphlets, books, educational material, etc.)
- $\infty$  Activity materials (arts & crafts supplies, paint, brushes, sponges, etc.)
- ∞ Fur and sewing supplies
- ∞ Breastfeeding equipment (blankets, cushions, etc.)
- ∞ Human resources and honorariums (for example: elders, hunters, fishermen, artists, youth, speakers, guides, etc.). This <u>does not apply</u> to employees who already receive a salary from their employer to organize or participate in the activity.
- $\infty$  Other expenses could be eligible if you are not sure ask an agent!

#### Some expenses might have to be discussed with an agent, such as;

- ∞ Prizes for contests & draws
- ∞ Fishing and hunting supplies
- $\infty$  Airfare and travel expenses (lodging, meals, plane tickets, etc.)
- $\infty$  Rental fees (equipment, room for activity, etc.)
- ∞ Gift cards (ITunes, Apple, Google, Northern, etc.)
- $\infty$  Other expenses could be eligible if you are not sure ask an agent!

## Ineligible Expenses

- $\infty$  Infrastructure expenses (building construction or maintenance, furniture, vehicles, etc.)
- ∞ Junk food
- ∞ Cash prizes
- $\infty$  Salary of an employee who organizes or participates in the activity as part of their job functions.
- $\infty$  If you are not sure, ask an agent!

<sup>&</sup>lt;sup>1</sup> According to the Nunavik Food Guide and the document; NRBHSS (2016), *Tips for choosing food for activities promoting healthy lifestyles*, 2p.