***NEW BRUNSWICK SECRETARIAT OF OFFICIAL LANGUAGES***

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| **New Brunswick Bilingualism Support Program (NBBSP)** |

**FUNDING APPLICATION FORM**

Fiscal year: April 1, 20 , to March 31, 20

Please review the program guidelines before completing the form.

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| PART A – GENERAL INFORMATION |
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| 1. **General information on the organization**
 |
| Organization name: |
| Address: | Telephone: |
| Website:  | Social media:  |
| Head office address (if different from mailing address): |
| 1. **Representatives of the organization or contact person**
 |
| Contact person: | President:  |
| Telephone: | Email:  |
| Language of communication: English French Bilingual (English and French) |

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| PART B – GENERAL PROJECT INFORMATION |
| **Project title:** |
| **Project area (choose one):** Arts and culture Cultural diversity Education Business/employment Local governance Youth Environment Justice Official languages Early childhood development Health and wellness Seniors’ services Sports and recreation Tourism |
| **Type of initiative (choose one):** Project Event If an event, please specify (choose one): Performance Seminar Conference Annual general meeting Workshop Festival Special occasion/holiday celebration Other (specify)  |
| **Project scope:** Local Regional Provincial  |
| **Project location:** |

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| **PART C – PROJECT DESCRIPTION** |
| **Project description:**  |
| **Project objectives:** |
| **Expected outcomes:** |
| **Specific activities planned:** |
| **Project visibility:** |
| **Efforts to bring the two official language communities closer together and promote bilingualism:** |
| **Schedule of activities:** |
| **Performance indicators:** |

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| PART D – PROJECT BUDGET |
| **EXPENDITURES**1. Fees
2. Promotion and communication
3. Translation and interpretation
4. Travel
5. Office expenses
6. Location
7. Other (specify)
8. General administrative fees (10% of budget)

**TOTAL EXPENSES** **REVENUE**1. NBBSP funding
2. Provincial government – specify:
* Department:
* Funding program:
* Contact name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* Email adress: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
1. Federal government
* Department:
* Funding program:
1. Municipal contribution:
2. Applicant contribution:
3. Contribution of partner organizations:
4. Other funding sources – specify:

**TOTAL REVENUE** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  |

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|  | **Name** | **Signature** | **Date** |
| President of organization  |   |   |   |
| Project manager or financial manager  |   |   |   |

Applicants are asked to please return the completed form and any related documents by email to Hello.Bonjour@gnb.ca. Alternatively, they may be sent by mail to the following address:

**New Brunswick Department of Intergovernmental Affairs**

**Secretariat of Official Languages**

**Chancery Place**

**P.O. Box 6000**

**Fredericton, New Brunswick**

**E3B 5H1**