

New Relationship Trust 2020-2021 First Nations K-12 Education Grant Initiative Application Form

Name of First Nation or Scho	pol:
Name of K-12 Project:	
Primary Contact:	
Email:	
Secondary Contact:	
Email:	
Mailing Address:	
City & Postal Code:	
Telephone:	
Fax:	
Amount Requested:	\$
Must complete all informati	ion above
Project Overview	
L. Please indicate whether y	your project is for Related Academic programs or Indigenous Culture.
☐ Academic Programs	
☐ Indigenous Culture	



- 2. Provide a brief overview of your project on a separate page. (2 pages max.)
- 3. Briefly describe how the project will benefit K-12 students within your First Nation or provide on a separate page. (2 pages max.)

Budget:

- 1. Please provide a complete budget for the project using the space below (or attach to the application).
- 2. Indicate other sources of funding, if any.

PROJECTED REVENUE		
NRT Grant requested amount (up to \$8000.00)	\$	
Other funding sources – First Nation	\$	
Other funding sources – Fundraising	\$	
Other funding sources – In Kind	\$	
Other	\$	
Total Projected Revenue	\$	
PROJECTED EXPENDITURES (please of	lescribe in detail)	
Education project costs:	\$	
Education supplies:	\$	
Texts books/tablet costs:	\$	
Other:	\$	
Total Projected Expenditures	\$	

^{*}Please do not list any ineligible expenses in budget



Application Checklist (Please sub	mit all supporting documentation with the application):
\Box Completed and signed	application form
☐ Description of project	and how the funding will benefit students within your First Nation
☐ Complete budget brea	kdown for all expenses for completion of the K12 project
\Box Letter of support from	local BC First Nation
Nations K-12 Education Grant Init this application form and in any d read the guidelines for the First N application, I agree to be bound b must be directly from the First Na	submitted with this application will be used to assess our First iative application. I hereby certify that the information provided with ocuments accompanying it is true, accurate and complete. I have ations K-12 Education Grant Initiative, and by submitting this by the policies and guidelines of this initiative. Authorized signatory tion's office (IE. Executive Director, Administrator, Education
coordinator, etc.) and must have to a coordinator, etc.) and must have to a coordinatory:	itte iistea.
Name & Title:	
Contact Phone Number:	
Date:	
Applications can be delivered by	mail, fax, emailed or dropped off in person.

Mail applications to:

New Relationship Trust First Nations K-12 Education Grant Initiative 3188 Alder Court North Vancouver, BC V7H 2V6 Attention: Lana Plante

Email to: Lana Plante, Project Officer

lplante@nrtf.ca

Fax to: 604-925-3348