



Atura Community Development Fund Application

SECTION 1

Contact Information:									
First and Last Name:									
Job Title:				Orga	ınizatioı	n:			
Email Address:				_	ne Num rated by				
Organization Informatio	n:								
If you're a Charitable Organization, enter Charitable Reg. Number:				We	bsite:				
Organization Address: (please include street, city, province and postal code)									
Organization Phone Number: (separated by dashes)						Years of Lo Operation:			
Organizational Purpose:									
SECTION 2 About your Initiative:									
Name of Initiative:									
name of initiative.		<u> </u>							
Estimated Amount of Initiat	tive:								
Please indicate what type of Agreement:	of fina	ncial con	nmitment yo	ou are look	ing to r	eceive from	the To	wn-Atura	
Multi-year agreement			One-time	contribution	า		Other		
If you've selected 'Other', pwords, please submit a sep						nmitment. (I	f you h	ave more th	nan 250





Atura is focused on a few major supports:	rınıtıatıves	s. Which one of Atur	a's focus ar	eas do yo	ou think your initiative besi
Safety		Community			Environment
Housing					
afety:					
Please select the category that	best desc	cribes your initiative:			
Emergency Response & Preparedness	Equ	ipment & PPE		Program	ns & Training
Education & Awareness	Oth	er			
community: Please select the category that	best desc	cribes your initiative			
Education		ivic Investment		Sports 8	Recreation
Social Services	A	Arts, Culture & Heritage Social Enterprise & Development		interprise & Cooperation oment	
Health & Wellness	С	community Events		Agricult	ure
Adaption to COVID-19 public health measures & restrictions or adjustments to operations in the new (or post recovery) ecor	nomy	Othe	er		
If you've selected 'Other', pleas (If you have more than 250 wor			document v	vith this a	oplication):



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Please select the category that best	describes your initiative:	
K – 12 Education Initiatives	Skills Development (includes scholarships, bursaries, etc.)	Research & Development Projects

Environment:

Please select the category that be	est describes your initiative:	
Conserve important habitat	Protect species at risk	Educate individuals about the importance of the environment

SECTION 3

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Details:	
Please describe your initiative in the comments box below.	
(If you have more than 250 words, please submit a separat	te document with this application).

Approximately how many people within Greater Napanee will directly benefit from your initiative? (If you have more than 250 words, please submit a separate document with this application).



Please describe what results / impacts you hope to achieve with your initiative.
(If you have more than 250 words, please submit a separate document with this application).
Please indicate the duration / timing of your initiative.
(If you have more than 250 words, please submit a separate document with this application).
Please describe what community impacts within Greater Napanee you hope to achieve with your initiative.
(If you have more than 250 words, please submit a separate document with this application).
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	peyond Greater Napanee, what pe	ercentage of the project will provide benefits
in other communities? (If you have more than 250 wo	rds, please submit a separate doc	cument with this application).
(ii you have more than 250 wo	ras, picase submit a separate doc	инсти шта аррпоацопу.
SECTION 4 Project Recognition:		
Please select all recognition or your initiative:	pportunities available to Town-Atu	ra Agreement as a result of our supporting
Radio commercial(s)	Print ad(s)	Social media
On-site visibility and signage (ex. Logo placement)	Logo placement on promotional materials	Public relations opportunities
Speaking or presenting opportunities for Atura	Other	
If you've selected 'Other', pleas		
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Does your initiative offer an opportunity for Atura employees to volunteer with your organization?
(If you have more than 250 words, please submit a separate document with this application).
Will find the form Town Atoms Assessment enable your executation to access matching founds from
Will funding from Town-Atura Agreement enable your organization to access matching funds from
governments, non-governmental organizations or other corporations? If yes, please provide the name of the
organization(s) and matching ratio below.
(If you have more than 250 words, please submit a separate document with this application).
Does your organization have a board of directors? If yes, please specify their name(s) and organization(s)
below.
(If you have more than 250 words, places submit a congrete decument with this application)
(If you have more than 250 words, please submit a separate document with this application).
Do you have other funding partners for this initiative? If you placed list them in the hey helpy and briefly
Do you have other funding partners for this initiative? If yes, please list them in the box below and briefly
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outline their support.
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Have you already been in contact with someone from the Town of Greater Napanee or Atura regarding your request? If yes, please provide the name(s) of the personnel in the box below and briefly describe your correspondence.
(If you have more than 250 words, please submit a separate document with this application).
If you would like to include additional comments about your initiative, please do so in the box below. Please note that you will be able to send supporting documents with this application.
(If you have more than 250 words, please submit a separate document with this application).

You have now completed the Atura Grant Application form.

To submit this form, please email it to Kylie Huffman at khuffman@greaternapanee.com.

Please ensure that you use "Atura Grant Application" in the email subject line.