

Independent Science Programs for Youth (I-SPY) Fund Application for Funding



Applicant Identification	
Applicant Organization:	Address:
Contact Name:	Phone Number:
Community:	Fax:
Postal Code:	E-Mail Address:

What type of not-for-profit organization do you run? (Please provide proof) <input type="checkbox"/>		
<input type="checkbox"/> Registered Society	<input type="checkbox"/> Not-for-profit corporation	<input type="checkbox"/> Registered charity
<input type="checkbox"/> Student organization	<input type="checkbox"/> Student Organization with Lottery Licence	

Estimated Project Costs- Please include any relevant documentation (Quotes, Brochures, etc)			
Activity	Description	Cost	Supporting Documents
		\$	<input type="checkbox"/> Project Budget

Eligible Program Costs (see the program guidelines and policy for more information)*		
<input type="checkbox"/> Purchase of equipment or supplies	<input type="checkbox"/> Travel and accommodations	<input type="checkbox"/> Fees for the facilitators

*Travel to/from and hosting of science fairs is not eligible for funding under this program

Activity	Description	Cost	Supporting Documents

Independent Science Programs for Youth (I-SPY) Fund Application for Funding



Detailed Description of Project (include start and end dates, attach further documentation if necessary):

For example:

- Who are the participants?
- How does the project meet the objectives identified for the I-SPY Fund (see Guidelines)
- Describe your organization's ability to carry out the proposed activities

Declaration of Applicant (All applicants to read and sign)

- I do swear that I have personal knowledge of the matters discussed in this application and state that: To the best of my knowledge, all statements made and material provided by or on behalf of the undersigned are true and correct;
- The proposed business plan or project complies with municipal, territorial or federal laws;
- I agree to provide representatives of the Department of Economic Development & Transportation (and all other organizations supplying project funding), with access to the site and premises of the project;
- I authorize the Department of Economic Development & Transportation to obtain personal and credit information about me from any source;
- If approved, I agree to supply relevant receipts requested by the Department of Economic Development & Transportation and all other organizations supplying project funding;
- I understand that the names of individuals and companies that receive grants and contributions from the Department of Economic Development & Transportation, together with the amounts of those grants and contributions, may be released to the Minister, the Legislative Assembly, municipalities, and the general public; and
- I make this declaration believing it to be true and knowing that it is of the same force and effect as if made under oath.

Applicant's
Signature:

Date:

Office Use Only

Date Received	Approved/Rejected	Date of Decision	Amount

Submit your completed and signed application to:

Anne Renee Angalik
Mining Awareness Coordinator
Department of Economic Development and
Transportation
PO Box 289
Arviat, NU
X0C 0E0

Phone: 867-857-3164
Toll Free: 1-888-975-5999
Fax: 867-857-2380
arangalik@gov.nu.ca