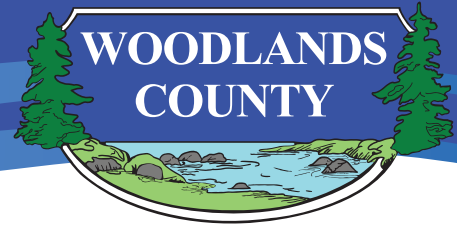


# Woodlands County Family & Community Support Services (FCSS) Application for Funding



## PART 1: ABOUT YOUR ORGANIZATION/GROUP

Organization Name:

(Group responsible for accounting funds)

\_\_\_\_\_

Project Name: \_\_\_\_\_

Contact Name: \_\_\_\_\_

Contact Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Executive Director (if applicable): \_\_\_\_\_

Number of Staff: \_\_\_\_\_ Full Time: \_\_\_\_\_ Part Time: \_\_\_\_\_

Volunteer Hours For This Project/Program For This Year: \_\_\_\_\_

Please Attach a Budget For This Project/Program That Includes the Following:

1. Identify all sources of revenue, including other FCSS funding you have applied for and what expenditures it is being allocated to, as well as any other grants

**Deadline for submission is the last Friday in February**

# Family & Community Support Services (FCSS) Application for Funding

## PART 2: APPLICATION

### 1. Certification of Compliance:

This is to certify that to the best of my knowledge and belief, the information included in this report complies with the requirements for "Eligibility for Support" Part B of the Information section.

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Name (Agency Signing Authority)

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Title

### 2. Executive Summary

On a separate sheet of paper:

Please provide a summary describing your program for which FCSS funding is being requested. This information will provide an informative overview of the services that you provide through this particular project. **If you are applying for this funding due to funding cuts from other sources, please describe.**

### 3. Prevention

In what way(s) is your project preventive in nature?

Check the appropriate items from the following list:

- be of a preventive nature that enhances the social well-being of individuals and families through promotion or intervention strategies provided at the earliest opportunity
- help people develop independence, strengthen coping skills and become more resistant to crisis
- help people to develop an awareness of social needs
- help people develop interpersonal and group skills which enhance constructive relationships among people
- help people and communities to assume responsibility for decisions and actions which affect them
- provide support that help sustain people as active participants in the community

### 4. Coordination and Communication

On a separate sheet of paper:

- A. Identify other organizations within the project's catchment area which provide similar services.
- B. What co-operative and coordinative steps has the project taken with these agencies?
- C. Describe the similarities and differences between the proposed project and those identified as being delivered by other organizations.

## 5. Logic Model

Please describe your program outcomes:

**Goal** (what you are trying to achieve?)

Eg. To increase social skills in young children

**Strategies** (the approach you will use to address issue/need)

Eg. Education and peer support to increase social skills in young children

**Activities** (specific actions you will use to work towards your goal)

Eg. Deliver social skills focused programming for children

**Outcomes** (the difference your activity or involvement will make 1 - 2 years.)

Eg. Young children will develop skills that enhance their positive interaction with other children

**Measurement Tool** Eg. Pre/post-test, survey

Eg. Pre/Post test comparisons; Observations

**A. Number of individuals served by this project**

(Clients should be counted only once.) Statistics from previous year.

Individual, Couples and Families: \_\_\_\_\_

Number of Group Participants: \_\_\_\_\_

Number of Groups or Organizations: \_\_\_\_\_

(most applicable for community development or public education work)

Total Clients Served: \_\_\_\_\_

# Family & Community Support Services (FCSS) Application for Funding

## PART 2: APPLICATION

### 5. Logic Model

#### B. Volunteerism

On a separate sheet of paper:

- A. What are the roles of volunteers in the program/project?
- B. How does the project promote, encourage, and facilitate the use of volunteers?
- C. Total number of volunteers in agency/project:
- D. Total number of volunteer hours in this year:

### 6. Additional Information

On a separate sheet of paper:

Please provide a brief agency/project history.

### 7. Additional Information

Please provide 1 or 2 short anecdotal stories about some of your clients who have received services from your organization, and how their situation has improved as a result of their involvement in this project. Please do not include any client identifying information.

## PART 3: NEXT STEPS

1. Applications go to the Community Services Committee for review. You should hear feedback on your application within eight (8) weeks.
2. Successful applicants will be required to provide an accounting of expenditure of funds by December 31 of that calendar year.
3. In addition you will be required to fill out an evaluation form of your project/program once completed.
4. All applicants/groups agree, by submission of their application and if your application is successful, to publication of data (such as name, amount of bursary/grant, and other related information) in Woodlands County publications, including but not limited to the Woodlands Communicator, Woodlands County website, and Woodlands County Facebook page.

For more information contact Woodlands County  
at **1.888.870.6315** or online at **woodlands.ab.ca**

