

APPLICATION DEADLINE DATE
June 30th, 2025 at 4:30 p.m.
No late applications will be accepted.



Application Form 2025

Dear Applicant:

The total allocations for 2026 funding will range from \$500,000 to \$600,000.

Please submit **only this application, SNCDT Application form 2026** package electronically to coordinator@sncomtrust.ca.

- In a continual effort to save paper we will only accept electronic copies. If you are unable to complete an electronic copy please contact the office.

NOTE:

- ✓ **ALL QUESTIONS MUST BE COMPLETED to be considered complete.**
- ✓ **Please ensure you read the handbook prior to completing this application.**
- ✓ **Please use the checklist attached to the Handbook.**
- ✓ **More information may be requested at any time failure to supply information will deem your application as incomplete and will not be considered for funding.**
- ✓ **All applicants will be required to make a community presentation. The Organization(s) that demonstrate a significant impact to Six Nations shall have a Six Nations member that is involved in the project in attendance at the community presentation.**

Should your organization receive funding from the Six Nations Community Development Trust:

- A Financial Agreement must be signed prior to the release of any funding
- A 10% hold back of funding is placed on all Financial Agreements, payment pending on approved final monitor. This is dependent on the payment schedule (reimbursements and third party payments have no hold back.)

Projects where there will be building renovations, land enhancements or infrastructure upgrades will need the following legal documentation included with application:

- proof of insurance including third party liability
- band council resolutions approving use of band owned land
- proof that any land or building is community owned

All submissions **require a letter of acknowledgement** from the board or advisory committee signed off by Board Secretary indicating they are fully aware of submission of project application to the Six Nations Community Development Trust.

**The deadline date for applications for 2025 is
June 30th, 2025 at 4:30 p.m.**

**Applications will be accepted electronically in pdf format.
NO late applications will be accepted.**

Applications must be submitted to email: coordinator@sncomtrust.ca.

PART A – ORGANIZATION INFORMATION

Organization:	
Department:	
Official Mailing Address: (include blue flag #)	
Telephone:	
Website:	
Email:	

	Primary	Secondary
Contact Person Name		
Band & Band Number		
Telephone		

1. Is your organization/group:

Choose an item.

Note: These are consider ineligible.

- Research (i.e. feasibility study, surveys & questionnaires)
- Payment of individual Board members for personal benefits (i.e. per capital monies to individual members of Six Nations or per capita distribution)
- Individual “for profit” projects (i.e. subsidizing their business)
- Expenses already covered by another program
- Projects that propose a wage, salary, honorarium or any form of remuneration to an existing board member and advisory committee member (including ex-officio members) of their organization
- Those projects dealing directly with children that do not complete a positive Vulnerable Sector Criminal Reference Check for all staff and volunteers
- Organizations where bona fide band membership representation on their board is in questions
- Organization not able to demonstrate a formal governance and accountability structure

Which is your Organization Type:

- ☐ Community Organization - I.e. GREAT, Red Barn, Minor Sports, Polytech etc.
- ☐ SN Council Department - I.e. Fire Services, Health & Wellbeing, etc.
- ☐ Organization external to Six Nations

2. What is your organization's and/or department's mandate/mission statement?
Max word count 250

3. How long has your organization/group been in existence?

4. Governance and management structure (see handbook note for criteria)

- a) Describe governance and management structure and insert organizational chart showing key positions.

Upload chart & Structure

- b) List of Board Members

Board Member's Name	Board Title

- c) List upcoming Board Meeting dates

Date/Time	Location

5. What activities has your organization/department provided or is currently offered to the community? Max word count 250

6. How many active staff members and volunteers belong to your organization/department?

	Full-Time	Part-Time
Staff		
Volunteers		

PART B – INFORMATION ABOUT YOUR PROJECT

1. Title of your project:

2. Where will this project take place?

3. Project Dates (must fall within the calendar year, January – December 2026)

Start Date:		End Date:	
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4. Provide a summary of your project's purpose and goals: Max 250 words

5. What evidence is there to support your project? Have any research, studies, surveys, questionnaires or other evidence been referenced to determine the need(s) identified? Example: Strategic Plan, Community Plan, Internal Needs Assessment, Ministry Guidelines). Max 250 words

6. The SNC DT provides funding for projects related to community development, cultural development, economic development, education and health. From the drop down menu select the top funding category that best applies to this proposal, then use the space provided to briefly explain why that funding category applies to this proposal. Max 100 words.

Choose ONE Category

7. a) How many members of the Six Nations Community do you anticipate will directly benefit and actively participate by your project? Please provide the mechanism for tracking.

Age Range	Number of Participants	Tracking Mechanism
Children (0 - 12)		
Youth (13 – 18)		
Adults (19 – 64)		
Seniors (65+)		

Please describe in 100 words.

- b) What is the indirect impact of the project? (Be concise, you have space for 100 words)

- 8. Please describe how you plan to market and communicate your project with the Six Nations Community? Reference examples in handbook. Max 100 words**

- 9. How will your project improve the Six Nations Community? (select a maximum of 3)**

- ☐ Formal education and/or training
- ☐ Traditional education and/or training
- ☐ Improve Skills – Increase Expertise
- ☐ Create Experience
- ☐ Create or Improve Physical infrastructure or Capital
- ☐ New resources, ie. Tool kits, education resources
- ☐ Economic growth
- ☐ Other

Please explain. (Be concise) Max 100 words

- 10. Please demonstrate how your project will collaborate with any other community initiatives? Max 100 words**

- 11. Please attach 2 letters of support for this project. (see handbook for criteria) Max 100 words**

12. Please provide a detailed work plan for January to December.

WORKPLAN

Purpose/Goal:	Activities	Responsibility	Timeline	Results	Evaluation Plan
<i>What do you want to achieve?</i>	<i>What are the main steps needed to achieve your project goals?</i>	<i>Who will be responsible for each activity (in your organization or a partner organization?)</i>	<i>When will each task begin and when will you complete it?</i>	<i>Your itemized list of expected outcomes.</i>	<i>How will you evaluate the results of your activities? How will you know if your work is successful?</i>

13. How will you acknowledge the SNCDT for providing funding for the project?
Max 100 words

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14. List the names of each Project Team member, identify their position, roles and responsibilities and attach brief (one page max) profiles of their related experience, training and expertise (including Elders, Traditional People, and consultants).

If the Project Team will need to be hired (request for salary dollars), attach job descriptions, outline of hiring process to be completed, notice of competition and statements of qualifications. If the Project involves a purchase of services, attach service descriptions and tender document.

Team Member	Position on Team	Roles & Responsibilities

Indicate your signing authorities for this project.

Name	Email	Title

PLEASE NOTE - CONFLICTS OF INTEREST

Applicants must reveal any relationships or interests they have which could unfairly influence their proposal, negatively affect the outcome of a project or otherwise jeopardize the integrity and reputation of the Trust.

PART C – FINANCIAL REQUIREMENTS

1. Amount of funding requested:

Please prioritize your expenditures by identifying the items of highest need.

#	Expense	Amount
1		
2		
3		
4		
5		
6		

2. How will your project continue to operate after SNCDT funding is concluded?

Note: sustainability also applies to capital projects – ie. Staffing, maintenance of facilities, equipment, etc.

3. Please include your organization's most recent financial statements. Audited statements are preferred. Council Departments must submit the department's profit center financials.

☐ **ATTACHED LAST YEAR'S FINANCIAL STATEMENTS**

**4. Financial Summary - Must be a reflection of your entire project's costs, not just the amount being requested.
Please be sure to indicate all other funding sources being sought.**

Item	Total Project Expense	Requested Funding SNCDT (must match Request)	Other Sources of Funding		In-Kind Contributions (given in non money form)		Source & Amount Requested & Due Date & Approval date Contact Person Telephone & Email Provide letters
			Confirmed	Potential	Confirmed	Potential	
Salaries & Benefits							
Program Costs (Program-related expenses such as materials, resources, travel, promotion)							
Administration (Rent, insurance, office supplies, account & legal)							
Capital (Computers, office furniture, equipment, renovations, repairs)							
Miscellaneous (Please specify)							
TOTAL		(must match Amount Requested in C1)					

Note:

- Please include sponsorships, donations and grants
- Provide any other financial assistance letters i.e. requests made and/or confirmed.
- Include our own contributions to the cost of the initiative and those in-kind (given in the form of goods or services and not money) contributions of your donors and community partners
- Specify the source of confirmed and potential income (including in-kind contributions) and provide the name, phone # and email

5. Project Cashflow 2026 - must be a reflection of your whole project costs, not just the amount being requested.

	Jan-26	Feb-26	Mar-26	Apr-26	May-26	Jun-26	Jul-26	Aug-26	Sep-26	Oct-26	Nov-26	Dec-26	Total
REVENUE													
SNCDT Funding													0.00
Program Funding													0.00
Other Funding													0.00
(a)TOTAL REVENUE	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
EXPENSES													
Human Resources													
Staff Salaries													0.00
Staff Benefits													0.00
Honorariums Paid													0.00
Administration													
Insurance													0.00
Internet Service													0.00
Photocopy & Fax Fees													0.00
Postage & Courier													0.00
Rent													0.00
Telephone/Fax													0.00
Utilities													0.00
Program Costs													
Advertising & Promotion													0.00
Bank Charges													0.00
Food & Entertainment													0.00
Mileage													0.00
Office Supplies													0.00
Police Checks													0.00
Resources													0.00
Training Allowances													0.00
Capital Costs													
Computers													0.00
Furniture & Equipment													0.00
Renovations													0.00
(b) TOTAL EXPENSES	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
(a-b) SHORT/OVER	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00

Personalize - Change and use the expense names you currently use for your project or in your current financial statements.

This cashflow should match Questions C4 totals.

Budget Notes to Cashflow

Breakdown all totals over \$500.00 below,

Examples:

- Salary - \$18,200 = 35 hrs @ 10.00/hr for 52 weeks
- Rent - \$12,000 = 12 mths @ \$1000/mth
- IPADS - \$2,000 = 4 Ipads @ \$500 each

Please Note:

Salary requests must include job descriptions, outline of hiring process, notice of competition and statement of qualifications. Salary dollars are non-transferrable if approved.

If possible, Estimates - any quotes from suppliers or sub-contractors should reflect the anticipated start date of the project in 2026.

All major capital costs and contract work over \$2500.00 will require 3 written estimates. Please summarize and prioritize on next page, Summary of Quotes.

Expense Breakdown List

Expense	Total	Breakdown

Summary of Quotes

Summarize and prioritize your quotes in the tables below

- ✓ All major capital costs over \$2,500 and major contract work over \$2,500 require 3 written estimates
- ✓ . Quotes must be of the same specifications and descriptions.
- ✓ Attach quotes to application.

List which expense quote is for _____

#	Supplier	Cost	Brief Summary
1			
2			
3			

Please explain why the first quote is your top choice.

List which expense quote is for _____

#	Supplier	Cost	Brief Summary
1			
2			
3			

Please explain why the first quote is your top choice.

List which expense quote is for _____

#	Supplier	Cost	Brief Summary
1			
2			
3			

Please explain why the first quote is your top choice.

PART D – RELEASE OF INFORMATION

I/We declare that all the information that has been provided to Six Nations Community Development Trust is true and correct. I/We therefore authorize the Six Nations Community Development Trust to obtain and/or make inquiries as deemed necessary for the evaluation of my application.

and that , I/We authorize any person, corporation or agency having information or knowledge of my project to release such information to the Six Nations Community Development Trust or a Representative thereof;

and that , I/We authorize The Six Nations Community Development Trust to release information or knowledge of my project to any person, corporation or agency and media requiring such information;

For the Recipient:

Signing Authority 1

Signing Authority 2

Printed Name

Printed Name

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June 30th, 2025 @ 4:30 p.m.
No late applications will be accepted.**

Applications must be submitted to email: coordinator@sncomtrust.ca

**Six Nations Community Development Trust
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Box 7, Suite 111, Ohsweken, ON N0A 1M0
Phone: 905-765-1236
Email: coordinator@sncomtrust.ca**