

2023 FCSS Funding Application

Carstairs FCSS	\bigcirc	Olds FCSS	\bigcirc
Cremona FCSS	\bigcirc	MVC FCSS	\bigcirc
Didsbury FCSS	\bigcirc	Sundre FCSS (not accepting	g applications)

FUNDING PERIOD: January 1 – December 31, 2023

Introduction

- Please read carefully all the information in this application form prior to your submission.
- Please note all shaded gray areas are reserved for your annual (final) report.
- Ensure the FCSS Measures Bank Provincial Priority Measures (attachment #1) are used in this application.
- Ensure the 2023 budget template provided, is used.
- Applicants may be required to provide a presentation on their application.
- You will be contacted once recommendations have been approved by the respective Council's.
- Successful applicants will be required to sign a Funding Agreement with each Municipality from which they receive funds. This agreement will include details of payment, financial and program reporting and other funding conditions.

Information

Family and Community Support Services (FCSS) is a partnership between the Province and a Municipality or Metis Settlement that develops locally driven preventive social initiatives to enhance the well-being of individuals, families and communities.

To obtain FCSS conditional funding, programs of service providers must meet the Provincial FCSS regulations. These programs must:

- a) 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, and
- b) do one or more of the following:
 - a. help people to develop independence, strengthen coping skills and become more resistant to crisis;
 - b. help people to develop an awareness of social needs;

- c. help people to develop interpersonal and group skills;
- d. help people and communities to assume responsibility for decisions and actions which affect them;
- e. provide supports that help sustain people as active participants in the community.

Programs and Services <u>not eligible</u> under the program include those that:

- a) provide primarily for the recreational needs or leisure time pursuits of individuals;
- b) are intended to sustain an individual or family (i.e. providing food, clothing or shelter);
- c) are primarily rehabilitative in nature, or
- d) duplicate services that are ordinarily provided by a government or government agency.

Conditions of Funding

- a) Funding received from the municipalities, must provide preventive social programs that directly benefits its residents.
- b) All funds must be spent by December 31st of the funding year. If you are anticipating a surplus contact the municipality prior to October 31st of the funding year.
- c) Outcomes must be measured and included in a final report by January 31 of the following year, and you must use measures from the FCSS Measures Bank Provincial Priority Measures (see attachment #1), (or visit the FCSS website) The Final Report will include all shaded gray areas on this application.

Submission of Application

Applications must be received at Mountain View County on or

before: November 10, 2022

Mountain View County
Attn: Josie McGillicky
Bag 100, Didsbury, Alberta, TOM 0W0

Fax Number: 403-335-9207

E-mail: grants@mvcounty.com



2023 FCSS Funding Application

	(Check any or all	(Check any or all to which you are applying)					
	Carstairs FCSS	\bigcirc	Olds FCSS	\bigcirc			
	Cremona FCSS	\bigcirc	MVC FCSS	\bigcirc			
	Didsbury FCSS	\bigcirc	Sundre FCSS (not accepting	g applications)			
AGENCY INFORMATION							
Agency Name:							
E-Mail Address and Website:							
Mailing Address (include postal code):							
Street Address:							
Agency Telephone Number:							
Agency Fax Number:							
Agency Contact Name:							
PROGRAM INFORMATION (Information to be	pe specific to the Program for	which you are	requesting funding)				
Program/Project Name:							
Program/Project Overview:							
Will the program and budget be impa	icted if full amount reque	ested is not r	eceived?				
If yes, please explain:							
yes, predect explain							

GRANT AMOUNT REQUESTED		GRANT AMOUNT AWARDED		
Carstairs FCSS	\$	Carstairs FCSS	\$	
Cremona FCSS	\$	Cremona FCSS	\$	
Didsbury FCSS	\$	Didsbury FCSS	\$	
Olds FCSS	\$	Olds FCSS	\$	
Mountain View County FCSS	\$	Mountain View County FCSS	\$	
TOTAL REQUESTED	\$	TOTAL AWARDED	\$	

TYPE OF ORGANIZATION				
 Alberta Societies Act Re 	egistration Number:	○ Governr	nent Agency:	
Charitable Number (if a	applicable):	Other (p	lease specify):	
AGENCY INFORMATION				
	our occupation Mississa Man	data and History		
Provide a brief overview or y	our agency (i.e. Mission, Man	date, and History).		
STRATEGIC DIRECTIONS:				
		Over-arching Goal		
FCSS	Senhances the social well-be	ing of individuals, families an	d community through prever	ntion
To qualify for FCSS funding,	your project/program must al	ign with the FCSS over-arching	g goal and address at least on	e of the five Provincially
identified Strategic Direction	ns. Please check all that apply	. If your program/project doe	es not align with the over-arch	ing goal or does not address
_			ontinuing with this funding ap	
○ SD1	○ SD2	○ SD3	○ SD4	◯ SD5
Help people to develop	Help people to develop an	Help people to develop	Help people and	Provide supports that help
independence, strengthen	awareness of social needs;	interpersonal and group	communities to assume	sustain people as active
coping skills and become		skills which enhance	responsibility for decisions	participants in the
more resistant to crisis;		constructive relationships	and actions which affect	community
,		among people:	them: and	,

PROGRAM LOGIC MODEL					
Program/Project Title:					
Statement of Need:					
What community issue, need or situation are you					
responding to? Evidence of need?					
Overall Goal:					
What change, or impact do you want to achieve?					
Strategy:					
How are you going to address the issue, need or					
situation? (what are the actions/steps/activities) i.e.					
Workshops, Counselling, Community Forums, etc.					
Was your Strategy implemented as planned above?					
If not, why? How did it go?					
Who is served:	Primary Target Popul	ation:			
Target Group	○ Children/Youth	Adults	Seniors	Family	Community
Target Group Rationale:	○ Children/Youth	○ Adults	○ Seniors	Family	○ Community
	Ochildren/Youth	○ Adults	Seniors	Family	○ Community
Rationale:	Children/Youth	○ Adults	Seniors	Family	○ Community
Rationale: Why will your strategy help you achieve your	Ochildren/Youth	○ Adults	Seniors	Family	○ Community
Rationale: Why will your strategy help you achieve your outcome(s)?	○ Children/Youth	○ Adults	Seniors	Family	○ Community
Rationale: Why will your strategy help you achieve your outcome(s)? What evidence do you have that this strategy will	○ Children/Youth	○ Adults	Seniors	○ Family	Community
Rationale: Why will your strategy help you achieve your outcome(s)? What evidence do you have that this strategy will work? Research? (Best Practices)	Children/Youth	○ Adults	Seniors	○ Family	○ Community
Rationale: Why will your strategy help you achieve your outcome(s)? What evidence do you have that this strategy will work? Research? (Best Practices) Resources Needed (Inputs):	Children/Youth	○ Adults	Seniors	○ Family	Community
Rationale: Why will your strategy help you achieve your outcome(s)? What evidence do you have that this strategy will work? Research? (Best Practices) Resources Needed (Inputs): Such as staff, volunteers, money, materials, equipment, technology, information – please be as specific as possible and include detailed information	Children/Youth	○ Adults	Seniors	○ Family	○ Community
Rationale: Why will your strategy help you achieve your outcome(s)? What evidence do you have that this strategy will work? Research? (Best Practices) Resources Needed (Inputs): Such as staff, volunteers, money, materials, equipment, technology, information – please be as	Children/Youth	○ Adults	Seniors	○ Family	Community
Rationale: Why will your strategy help you achieve your outcome(s)? What evidence do you have that this strategy will work? Research? (Best Practices) Resources Needed (Inputs): Such as staff, volunteers, money, materials, equipment, technology, information – please be as specific as possible and include detailed information on the needed financial resources in your budget. Partners:	Children/Youth	Adults	Seniors	○ Family	Community
Rationale: Why will your strategy help you achieve your outcome(s)? What evidence do you have that this strategy will work? Research? (Best Practices) Resources Needed (Inputs): Such as staff, volunteers, money, materials, equipment, technology, information – please be as specific as possible and include detailed information on the needed financial resources in your budget.	Children/Youth	Adults	Seniors	Family	Community

OUTPUTS			For Funding Application: Complete White Areas For Annual Report: Complete Shaded Gray Areas							
Municipality	Anticipated	Anticipate	d	Anticipat	ed	Actu		Actual Adul	ts	Actual Seniors
	Children/Youth	Adults		Seniors		Child	dren/Youth			
Carstairs										
Cremona										
Didsbury										
Olds										
MVC										
Total # of										
Participants										
OTHER OUTPUTS					For Fundir	ng Ap	pplication: Com	plete White	Areas	
					For Annua	al Rep	port: Complete	Shaded Gray	/ Areas	
Municipality	Anticipated # \	/olunteers	Anticip	ated # Volu	unteer Hou	rs	Actual # Vol	unteers	Actua	l # Volunteer Hours
Carstairs										
Cremona										
Didsbury										
Olds		·								
Mountain View County	у									

OUTCOMES				# of Participants Completing the Measurement Tool:
Outcome Measured:	Indicators(s) of Success: (How will you know this outcome has been achieved?)	Provincial Outcome & Indicator Alignment: (Attachment #1)	Measures Bank Measure Number: (Attachment #1)	Measures(s): (see attachment #1) (Leave shaded gray areas blank until you are ready to submit annual report)
1.	1.			# completing this measure: # experiencing a positive change:
				2. (if more than one measure for this indicator) # completing this measure: # experiencing a positive change:
	2. (if more than one indicator for this outcome)			# completing this measure: # experiencing a positive change: 2. (if more than one measure for this indicator) # completing this measure: # experiencing a positive change:
2.	1.			# completing this measure: # experiencing a positive change: # experiencing a positive change: 2. (if more than one measure for this indicator) # completing this measure: # experiencing a positive change:

2. (if more than one indicator for this outcome)		1.
sine cascome,		# completing this measure: # experiencing a positive change:
		2. (if more than one measure for this indicator)
		# completing this measure: # experiencing a positive change:

ADDITIONAL INFORMATION		
Identify Measurement Tool(s) Used:		
○ Survey ○ Interview		
When Measurement Tool(s) Used:		
Pre-test/Post-Test: both before and after your activities	Post-Only: after activities	○ Other
Continuous Quality Improvement		
After analyzing the information, should this program/project continue?	Was the program successful?	
What improvements can be made to the program/project?		
What improvements can be made to the outcome measurement process	?	
Supporting details regarding the program:		
Successes:	Changes to be made:	

Completed By:	Date:
DOCUMENTATION REQUIREMENTS:	ATTACHED:
List of current Board of Directors (name and position only)	
Project Logic Model & Outcomes (pages 2 – 5)	
Project Budget (page 9)	
Most recent Audited Financial Statement	
Current Audited Financial Statement (For annual report only)	
FINANCIAL INFORMATION	
Amount of Funding allocated for the 2023 fiscal year:	

Amount of Funding allocated for the 2023 fiscal year:	Ι.		
Carstairs FCSS	\$		
Cremona FCSS	\$		
Didsbury FCSS	\$		
Olds FCSS	\$		
Mountain View County FCSS	\$		
Do you have a surplus of funds for your 2023 project? (advise prior to	October 31, 2023)		
Carstairs FCSS	○Yes	○No	
Cremona FCSS	○Yes	○No	
Didsbury FCSS	○Yes	○No	
Olds FCSS	○Yes	○No	
Mountain View County FCSS	○Yes	○ No	

2023 PROGRAM BUDGET PROF	Actual Costs		
Each program you apply for ne	For Reporting		
Revenue	(Include grant approvals from all FCSS Agencies)		
Donations		\$	
Fundraising		\$	
Other Grants		\$	
In-Kind Contributions		\$	
Fees		\$	
	Total Revenue (A)	\$	
Expenses			
Personnel Costs:			
Fac	ilitator/Guest Speaker Costs	\$	
Sta	ff Salaries & Benefits connected with the Program	\$	
Volunteer Training & Recognition		\$	
Operations Cost:			
•	ilities, Office or Venue Rent	\$	
	fessional Fees	\$	
Equ	iipment	\$	
	gram Administration Costs	\$	
Administration Costs (specify)			
Adv	vertising (publicity & promotions)	\$	
Pos	Postage		
	dit & Accounting	\$	
Tot	al Expenses (B)	\$	
Total Eligible Funding (B-A)		\$	

2023 PROGRAM BUDGET PROPOSAL: CREMONA FCSS			Actual Costs
Each program you apply for needs to have a separate application/budget Revenue			For Reporting
			(Include grant approvals from all FCSS Agencies)
Donations		\$	
Fundraising		\$	
Other Grants		\$	
In-Kind Contributions		\$	
Fees		\$	
	Total Revenue (A)	\$	
Expenses			
Personnel Costs:			
Fa	acilitator/Guest Speaker Costs	\$	
St	taff Salaries & Benefits connected with the Program	\$	
V	olunteer Training & Recognition	\$	
Operations Cost:			
•	acilities, Office or Venue Rent	\$	
Pı	rofessional Fees	\$	
Ec	quipment	\$	
	rogram Administration Costs	\$	
Administration Costs (specify)			
A	dvertising (publicity & promotions)	\$	
Po	ostage	\$	
	udit & Accounting	\$	
Te	otal Expenses (B)	\$	
Total Eligible Funding (B-A)		\$	

2023 PROGRAM BUDGET PROPOSAL: DIDSBURY FCSS			For Reporting (Include grant approvals from all FCSS Agencies)
Each program you apply for needs to have a separate application/budget Revenue			
Fundraising		\$	
Other Grants		\$	
In-Kind Contributions		\$	
Fees		\$	
	Total Revenue (A)	\$	
Expenses			
Personnel Costs:			
Fa	cilitator/Guest Speaker Costs	\$	
Sta	aff Salaries & Benefits connected with the Program	\$	
Vo	olunteer Training & Recognition	\$	
Operations Cost:			
Fa	cilities, Office or Venue Rent	\$	
Pr	ofessional Fees	\$	
Eq	juipment	\$	
	ogram Administration Costs	\$	
Administration Costs (specify)			
Ac	lvertising (publicity & promotions)	\$	
Po	ostage	\$	
	udit & Accounting	\$	
To	otal Expenses (B)	\$	
Total Eligible Funding (B-A)		\$	

2023 PROGRAM BUDGET PROPOSAL: OLDS FCSS			Actual Costs
Each program you apply for needs to have a separate application/budget			For Reporting
Revenue			(Include grant approvals from all FCSS Agencies)
Donations		\$	
Fundraising		\$	
Other Grants		\$	
In-Kind Contributions		\$	
Fees		\$	
	Total Revenue (A)	\$	
Expenses			
Personnel Costs:			
Fa	acilitator/Guest Speaker Costs	\$	
St	taff Salaries & Benefits connected with the Program	\$	
	olunteer Training & Recognition	\$	
Operations Cost:			
· .	acilities, Office or Venue Rent	\$	
	rofessional Fees	\$	
Ec	Equipment		
	rogram Administration Costs	\$	
Administration Costs (specify)			
A	dvertising (publicity & promotions)	\$	
Po	ostage	\$	
A	udit & Accounting	\$	
+			
To	otal Expenses (B)	\$	
Total Eligible Funding (B-A)		\$	

2023 PROGRAM BUDGET PROPOSAL: MOUNTAIN VIEW COUNTY FCSS			Actual Costs
Each program you apply for needs to have a separate application/budget Revenue			For Reporting
			(Include grant approvals fron all FCSS Agencies)
Donations		\$	
Fundraising		\$	
Other Grants		\$	
In-Kind Contributions		\$	
Fees		\$	
	Total Revenue (A)	\$	
Expenses			
Personnel Costs:			
F	acilitator/Guest Speaker Costs	\$	
S	taff Salaries & Benefits connected with the Program	\$	
V	olunteer Training & Recognition	\$	
Operations Cost:			
	acilities, Office or Venue Rent	\$	
P	rofessional Fees	\$	
E	quipment	\$	
	rogram Administration Costs	\$	
Administration Costs (specify	r)		
A	dvertising (publicity & promotions)	\$	
P	ostage	\$	
Α	audit & Accounting	\$	
Т	otal Expenses (B)	\$	
Total Eligible Funding (B-A)		\$	

COMPLETED APPLICATIONS:

- 1. Submit one original signed copy of the application (via mail or drop-off at the Mountain View County office) or
- 2. E-mail a copy to: grants@mvcounty.com (scanned signatures will be accepted). Unsigned applications will be returned.
- 3. Fax a copy to (403-335-9207)
- 4. By Mail: Mountain View County, Attn: Josie McGillicky, Bag 100, Didsbury, Alberta, TOM 0W0

Applications must be received at Mountain View County on or before November 10, 2022

DECLARATION:

I declare that all the information in this application is accurate and complete, and that the application is made on behalf of the named organization with its full knowledge and consents and complies with the requirements and conditions set out in the Family and Community Support Services Act and Regulation.

(http://humanservices.alberta.ca/family-community/14876.html)

I acknowledge that should conditions.	l this application be approved; I will be requi	red to enter into a funding agreement w	hich will outline the terms and
Print Name	Authorized Signature	 Date	
For Annual Report Only			
Completed by:		Date:	
	ember: In completing this report, we, the un		to the best of our knowledge, the
information provided is t	ruthful and accurate, and is made on behalf	of the above-named organization.	
Print Name	Authorized Signature	 Date	
If you have questions, cor	ntact your Local FCSS Office		
Carstairs FCSS	403-337-3341	Mountain View County FCSS	403-335-3311
Cremona FCSS	403-637-3731	Olds FCSS	403-556-6981
Didsbury FCSS	403-335-8719	Sundre FCSS	403-638-1011