



# Town of East Gwillimbury

## YOUTH ASSISTANCE FUND Distribution Guidelines and Application Form 2009 - 2010

### **Purpose**

The Town of East Gwillimbury is committed to helping the youth of the Town to participate in activities and programs they would otherwise not be able to afford. The Town has set up a “Youth Assistance Fund” for this purpose. The Annual Mayor & Council Charity Golf Tournament held in September of each year provides the money available for this Fund. This fund will provide financial assistance to individuals to help them participate in the various activities offered throughout the Town or activities outside of the Town that promote the Town.

Grant criteria have been established to evaluate requests submitted in an equitable and efficient manner. However, if funds are limited, priority will be given to individuals who are unable to afford participation. Please submit a completed application form to the Office of the Mayor and Members of Council, Town of East Gwillimbury, 19000 Leslie Street, Sharon, ON, L0G 1V0 or fax to 905-478-4291.

### **Eligibility Criteria – Please read carefully:**

*While the criteria and application forms have been developed as guidelines, special circumstances will be considered on an individual basis.*

1. 1.1 Applicants for the Youth Assistance Fund of East Gwillimbury must be under 19 years of age.
  - 1.2 The recipient/family should be available to volunteer for the Town of East Gwillimbury at the discretion of Council.
  - 1.3 This fund will support youth who are unable to afford participation in an activity (e.g. registration fee, uniforms, equipment, supplies). Financial constraints prohibiting participation in an activity should be described.
2. There is a maximum of one grant to any one individual in any one calendar year to a maximum of three grants. Priority will be given to first time applicants.

*“Our town, Our future”*

19000 Leslie Street, Sharon, Ontario L0G 1V0 Tel: 905-478-4282 Fax: 905-478-4291

[www.eastgwillimbury.ca](http://www.eastgwillimbury.ca)

3. Groups may apply on behalf of individuals within their organization.
4. Although Council will consider exceptions, a maximum grant of \$1,500 for an individual will be considered in any one year.
5. **Applicant must provide an invoice (verification of amount that activity/item will cost) for each activity/purchase.**  
**Once an application is approved, payment will be made to the organization/vendor that provided an invoice.**  
**\*\* Reimbursements are not part of this funding program. \*\***
6. These criteria and application forms have been developed as guidelines. Unique circumstances will be considered by Council on an individual basis.

### **Application**

All groups or individuals applying for a grant must provide a completed grant application.

### **Administration**

Council will review all applications and Council's decision will be final.

Distribution of funds will be through the Executive Assistant to the Mayor and Members of Council.

**Youth Assistance Fund Application Form – 2009**

Applicant	
Relationship to Youth	
Address	
Phone & E-Mail	

You may apply for more than one activity per child; however, each activity for each child must be listed separately.

**\*\* An invoice or receipt must accompany each activity.\*\***

Child's Name	Age	Activity	\$\$ Requested
		<b>TOTAL REQUESTED:</b>	<b>\$</b>

1. Reason for application (if you are applying because of financial hardship, please explain):

---



---

2. If you are not the parent or guardian of the child/children listed above (e.g. social worker, teacher); is the parent/guardian aware you have made this application on behalf of the child/children?     Yes  No

If NO, why not? \_\_\_\_\_



Indicate how you are able to volunteer to the Town:

- € Assist with the Mayor & Council Charity Golf Tournament
- € Assist with Volunteer Appreciation Night
- € Assist with Santa Claus Parade
- € Assist with Remembrance Day Service
- € Assist with Pancake Breakfast
- € Other Ideas – please describe (e.g. clean up programs, Mount Albert Sports Day, etc.)

---



---



---

6. Did you receive or are you requesting funding from any other organizations, groups or agencies? If yes, from whom and how much did you receive?

---



---

Is this application being made on behalf of an individual or group representing the Town of East Gwillimbury? If yes, please explain.

---



---

\*\*\*\*\*

The application acknowledges that if a grant is provided, an evaluation of the success of the grant will be required.

Dated this \_\_\_\_\_ Day of \_\_\_\_\_, \_\_\_\_\_  
(Month) (Year)

\_\_\_\_\_  
**Signature of Applicant**