

# **The Eva Leflar Foundation Grant Application.**

*Please retain pages 1&2 for your files. Submit remaining pages with applicable documentation*

## **Background information**

The Leflar Foundation mission is to help children and youth in the Owen Sound and Grey/ Bruce county area. We offer financial support to non-profit, charitable organizations that provide opportunities or services to children in our area in recreational, educational, cultural and medical endeavors. Our intent is to assist disadvantaged children and youth, in order that they may participate in activities or obtain services that they might not otherwise have access to.

The Leflar Foundation was founded by Eva Leflar in 1990. For many years, Eva worked with young people in the Grey/Bruce area through the Owen Sound Children's Aid Society. Always feeling that so many children with great potential were missing out on opportunities, and having a generous spirit, Eva chose to take action and began the Foundation from her own personal resources. Since its inception, the Foundation has helped local area children participate in sports, attend camps, join choirs and theatre groups, obtain post secondary educations and receive advanced medical care. Over two million dollars has been donated to schools, hospitals, cultural and sports groups and other children's organizations since 1990.

**In order to be considered for funding at our spring meeting, applications must be received by The Foundation by March 1<sup>st</sup> of the current year, or by September 1<sup>st</sup>, for funding at our fall meeting. The meetings are generally early April and Mid-October. Applications are to be sent by mail to:**

**The Leflar Foundation  
700 Strasburg Road,  
PO Box 46028  
Kitchener, Ontario.  
N2E 4J3  
Email: [info@leflarfoundation.com](mailto:info@leflarfoundation.com)**

## **Criteria**

When evaluating donation requests, the Board of Directors of the Eva Leflar foundation consider the following:

- 1) Is the applicant a not-for-profit organization that services the needs of children and youth from the Owen Sound and Grey/Bruce area?
- 2) Does the applicant have a registered charitable number or authorized charitable status, or is sponsored by an organization that does?
- 3) Will the applicant's activities or specific project benefit disadvantaged children and youth in the areas of education, medical needs, physical activity, musical or other cultural development, or personal growth through other extra-curricular endeavours?
- 4) Applications will NOT be considered:
  - a. In response to regular, non-specific annual fundraising drives or programs

- b. To retire debt
- c. Sectarian or political organizations
- d. Organizations that are totally government funded
- e. Individuals
- f. Bricks and mortar projects are generally not funded by the Leflar Foundation, but we will accept and review these applications for consideration, dependant on their beneficial merit to the children of our area.

### **Selection Process:**

All applications for grants from The Eva Leflar Foundation will be reviewed at one of our semi-annual Directors meetings set for the purpose of grant approval, to determine their eligibility.

All eligible applications will be reviewed by the Board of Directors which will award the grants to all deserving applicant organizations on the basis of:

- a. Support or programming provided to children and youth of Grey/Bruce counties, in particular disadvantaged children/youth.
- b. Project or program objectives/evaluation procedures
- c. Organizational strength
- d. Fiscal and management responsibility/stability
- e. Demonstrated/researched need for the project or program

All applicants will be advised in writing of the success of their application.

### **Requirements**

- 1) Please complete one copy of this application form and return it to The Eva Leflar Foundation to the address below. All applications must be signed by at least one authorized officer of the applicant organization. Enclose with the application one copy of the following information:
  - a. A copy of your most recent financial statements
  - b. A copy of your current annual budget and/or budget for the specific project for which the application is being made if applicable.
  - c. A copy of documents confirming your charitable registration status including registration number, where applicable.
  - d. If charitable registration of a sponsoring organization is being used, written confirmation of that organizations awareness and agreement to this application containing THEIR registered charitable number where applicable and information from a) and c) above.
  - e. General information brochure for your organization or project, if applicable.
- 2) A single page follow-up report is expected within one year. A photograph of the project or program activities for inclusion in The Foundations annual report or addition to our website are requested with this follow-up.
- 3) If the project fails the applicant organization will contact The Foundation in a timely manner so that a determination may be made whether the grant needs to be returned.

The Leflar Foundation Board of Directors invites relevant applications, gives careful consideration to every application received and is very pleased to offer grants to those who fit our mandate. Thank you for your interest.

**The Eva Leflar Foundation  
General Application – Page 1**

Application Date: \_\_\_\_\_

*Please complete this form using only the space provided.*

Name of the organization applying: \_\_\_\_\_

Amount Requested: \$ \_\_\_\_\_ Charitable Registration Number: \_\_\_\_\_

Name of Contact person(s): \_\_\_\_\_ Title: \_\_\_\_\_

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

\_\_\_\_\_

\_\_\_\_\_ Telephone: \_\_\_\_\_

Signature of Contact Person \_\_\_\_\_

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Information of Sponsoring Organization (if applicable):

Sponsoring Organization \_\_\_\_\_

Charitable Registration Number: \_\_\_\_\_

Name of Contact person(s): \_\_\_\_\_ Title: \_\_\_\_\_

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

\_\_\_\_\_

\_\_\_\_\_ Telephone: \_\_\_\_\_

As representative of the above noted Sponsoring Organization, I acknowledge we are aware of, and support this application.

Signature: \_\_\_\_\_ Title: \_\_\_\_\_





**Grant Application – Page 4 Organizations Name:** \_\_\_\_\_

Space for any additional Information