INDIGENOUS COMMUNITY SUPPORT FUND PROPOSAL

PAW Number/Fiscal Year:
84458230 (2023-2024)

Purpose:
Indigenous communities and organizations seeking funding under the Indigenous Community Support Fund are required to provide a proposal that indicates all activities to be undertaken and expected results and outlines the proposed budget for the activities.

Due Date:
Contact your [Indigenous Services Canada (ISC) Regional Office](#) for details.

Field Definitions:

Field	Definition
Identification	
Applicant Name	The name of the community, institution, organization or other group applying for the grant and/or contribution(s) as per the legal name that will appear on the funding agreement.
Applicant Number	The attribution number for the community, institution, organization or other group as shown in the Department's Financial Management Manual (Crown-Indigenous Relations and Northern Affairs Canada (CIRNAC)/Indigenous Services Canada (ISC) internal use). Leave blank if you do not yet have an attribution number.
Region	From the drop-down list, select the CIRNAC/ISC Region to which this application is being submitted.
Beneficiaries of the Proposed Activities	Select one or more of the following Indigenous groups that will benefit from the funding: • First Nation On-Reserve • First Nation Off-Reserve • Inuit • Métis • Urban/Off-Reserve Indigenous Communities and/or Individuals
Contact	
Given Name Family Name Title/Position Mailing Address (Number/Street/Apartment/P.O. Box) City/Town Province/Territory Postal Code	The name and contact information of the person who can be contacted for further information about the application. A valid postal code is in upper case in the format, A#A #A#. A valid telephone number includes the 3 digit area code in the format, ###-###-####. A valid facsimile number includes the 3 digit area code in the format ###-###-####.

Field	Definition
Telephone Number Facsimile Number Email Address	A valid email address may be in upper or lower case in the format a@a.a.

Application Information

Field	Definition
Proposal title	Provide the title of the proposal for funding. The title reflects the nature of the project.
Proposal summary	Provide a brief description of the proposal for funding. This implies an identification of the main purpose and a description of key activities, tasks and deliverables associated with the funding request, sufficient for departmental officials to evaluate the project proposal against program objectives, regional or national considerations, criteria on eligibility, expenditures, etc. If the funding will flow through to a partner, please include that information here.
Start/End Dates of Proposed Activities	Please enter the planned or actual start and end dates for the activities listed below. If there are different start and end dates, enter the earliest and latest dates.

Budget Summary

Field	Definition
Budget Item	Enter all budget items that are applicable to your proposal directly into the table. Add a new row (click [+] on the left side) for each additional item. • Perimeter Security • PPE for non-medical staff • Installation of physical barriers • Food security • Transportation • Cleaning supplies • Additional non-medical staff costs • Lodging and accommodation • Minor infrastructure • Mental wellness support • Cultural supports • Seniors support • Child and family supports • Online learning supports • Communication of information • Vaccine support • Administration costs • Other
Description	Provide a brief description of the function provided by each budget item, activity or sub-activity.
Rate or Cost ($)	The rate or cost of the budget item. Amount in the format $0.00 (dollar value only)
Unit	Select unit of rate (if applicable):

Field	Definition
	per hour (/hr); per day (/day); per month (/month); not applicable (N/A)
Quantity	Enter the quantity in number format (unit value only).
Cash Total ($)	Total dollar value ($) for each budget item is calculated automatically.
Total Requested Amount ($)	The total dollar amount ($) requested from Indigenous Services Canada (ISC) for all budget items is calculated automatically.
Partners	
Will Partners be involved?	Indicate (Yes or No) if Partners will be involved in this proposal.
Partner Name	If this is a joint proposal, please list all partners involved (i.e. the organization name involved in the partnership). National or regional organizations that will distribute the funding to service delivery organizations must list those organizations. Add a new row (click [+] on the left side) for each additional partner.
Involvement	Indicate the nature of each partner's involvement (i.e. provide a brief description of their role and activities). National or regional organizations that will distribute funding to service delivery organizations must provide a description of how funding would be allocated to those organizations.
Contact Name	The first and last name of the contact person in the partner organization.
Telephone Number	A valid telephone number for the contact person, includes the 3 digit area code in the format ###-###-####.
Email Address (if applicable)	A valid email address for the contact person (if applicable), may be in upper or lower case in the format a@a.a.
Other Governmental Funding	
Have you received or requested any other governmental funding (e.g. federal, provincial, territorial, municipal) to address this need?	Indicate (Yes or No) if you have received or requested any other governmental funding (federal, provincial, territorial, municipal) to address this need.
Source	If 'Yes', please list all sources of funding that have been applied to. Add a new row (click [+] on the left side) for each additional source.
Outcome	Indicate the outcome of your funding request from the drop-down list. Select one of the following: Approved; Not approved; Waiting on decision
Amount	Enter the amount of other governmental funding received/requested. If the amount received was an in-

Field	Definition
	kind contribution and you know its value, you can enter the amount. The currency is automatically formatted.

Supporting Documents (if applicable)

This table allows you to identify the supporting document(s) being submitted and the method of submission.

Field	Definition
Title	Enter the name of the supporting document.
Submission Method	From the drop-down list, select the method by which additional documents will be submitted. The options include: - Attachment - Email - Facsimile - Mail - By Hand/Courier If you select 'Attachment' as the submission method, an 'Attach File' button will appear. Selecting this button allows you to select a file that will be attached to the form. After attaching the file you can click on the paper clip icon on the left side of the Adobe application to see the attached file. Once the file is attached, the "Attach File" button changes to "Remove File". To remove the file only, select this button. To clear all fields for a single document and remove the associated file, select the [-] button.

Declaration

Field	Definition
Given Name Family Name Title Date (YYYYMMDD)	The given name, family name and position title of the person who acknowledged the accuracy of the information, and the date on which it was completed. Dates are in the format of 'Year Month Day'.