COMMUNITY ECONOMIC DEVELOPMENT FUND APPLICATION GUIDE







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Sept 2023 Page 1 of 7

What is the Community Economic Development Fund for Community Development Corporation of Sault Ste. Mare & Area (CDC)?

 The Community Development Fund has been approved by the Board of Directors for the 2023 – 2028 period. The CDC has allocated \$125,000 for local projects in support of Economic Development in Sault Ste. Marie and Area. These funds will be disbursed over the next 5 years on a continuous basis. The allocation to March 31, 2024 allocation of \$25,000.

Fund Objectives:

- Support community projects and initiatives that promote economic development for Sault Ste. Marie and Area.
- Increase awareness of the CDC in our region.
- Create new or enhance existing partnerships in our region.

Who is eligible to apply?

 Non-profit organizations engaging in Community Economic and Business development organizations within the CDC's region.

Eligible organizations include the following:

- Economic Development Corporations
- Non-profit organizations
- First Nations
- Municipalities
- Chambers of Commerce
- Business Improvement Associations

What types of activities may be considered eligible?

The maximum grant total per project would be normally limited to \$2,500 for projects that encourage economic development such as:

- Community or Industry Sector Marketing initiatives
- Special Event Costs
- Business development related conferences
- Strategic Planning for non-profits
- Labour force development projects and events
- Entrepreneurship for Youth, Immigrants, and other strategic groups

• Others with Economic Development

Sept 2023 Page 2 of 7

What types of activities may be considered ineligible?

Ineligible projects may include the following:

- Normal ongoing operational activities;
- For profit activities.

What Criteria does the CDC use in evaluating projects?

Projects should demonstrate some or all the following elements:

- Have a positive economic contribution leading to economic development over the short to medium term:
- Promote economic activity in strategic/targeted area of Sault Ste. Marie and regional economy;
- Leverage funds;
- Demonstrate need for funds:
- Unless otherwise approved, fall within our limit of \$2,500.

What Communications may be required?

The recipient will provide an opportunity for the Community Development Corporation of Sault Ste. Marie & Area to receive public profile and acknowledgment for the support it extends to eligible projects. This could include the inclusion of logos on printed materials, press releases or press conferences. Opportunities for communications can be discussed with CDC staff. Applicant will supply a short final report outlining the outcome of the project, examples may include; - attendees/publications, leverages/partners/studies etc.

What is our application process?

If you feel your organization could take advantage of this program and meet some identified economic needs, please complete the application as fully as possible and attach any additional information that you feel is necessary to both describe your project and how you will carry it out. Community Development staff at the CDC are available to assist with this process. Applicants are encouraged to consult CDC staff for any clarification or feedback.

Applications will be evaluated by the Executive Director based on the eligibility criteria previously conveyed. Any questions will be addressed to the contact person for your project.

You should retain a copy of your completed application for your records and submit a copy (by e-mail or hand deliverer) to the office listed below. Information and application forms are also available from the location given below.

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Sept 2023 Page 3 of 7

Community Economic Development Fund Application

Date Received:

(For Office Use Only)

Before completing this application, please read the *Application Guide* and *Essentials of Any Proposal*. If you have any questions, call the CDC office at (705) 942-9000.

Funding Requested: \$				
Information on your CED Activity				
Project Title/Name:				
Start Date: (dd-mm-yyyy)	Completion Date: (dd-mm-yyyy)			
Project Location:				
Community, Group or Organization	Requesting Funding			
Group Name:	Contact Person:			
	Title/Position:			
Address:	Tel Work:			
Town/City:	- Home:			
Postal Code:	- Fax:			
Web-site:	E-Mail:			
Define your Group, Organization or (Community – Its Mandate and Background			

Sept 2023 Page 4 of 7

Provide a Brief Summary of Your Project and how it meets the economic development mandate of this program.
Will this project create or sustain employment? (If so, indicate number, short-term / long-term, full-time / part-time.)
What resources are being committed to this project by partners, groups/organizations and levels of government? (Include: time, skills, talent, "in-kind" contribution, financial, etc. Be as specific as possible.)
What specific methods will your group/organizations use to measure the success of this
project?
Application from a Not for Profit, Municipality or First Nation. Please include (or attach) a recent financial statement and resolution from the Not for Profit, Municipal Council or Band Council formally requesting funds from the Community Development Corporation of Sault Ste. Marie & Area's Community Economic Developmental Fund to assist with this project.

Sept 2023

Detailed Project Budget

Complete the chart below or attach information that clearly outlines the costs and revenues for your project. Include written quotations or estimates from suppliers where required as well as any letters of support confirming any Partner contributions.

Project Costs (Please List)	Amount	Project Revenue Amount Confirmed (Sources of Funding)	Anticipated			
		a) Government Funding:				
		Federal				
		Provincial				
		Municipal				
		b) Other sources of funding:				
		Your Group/Organization Funds				
		Fund Raising				
		Other Funds (e.g., corporate, sponsorships, other partners) Please specify:				
		c) In-kind Contributions:				
		Donated Labour/Equipment Please specify:				
		Donated Material Please specify:				
		d) CDC Funds				
Total Project Costs:		Total of Financial Sources				

(Total Project Costs must equal Total of Financial Sources)	
Amount requested from the CDC (\$)	

Statement by Applicant

On behalf of and with the authority of the organization, I certify that the information given on this application to the CDC CED Fund is true, correct and complete in every respect. It is understood that if approved for CED funding, a CED Contribution Agreement will be prepared by the CDC and the organization will need to agree to and abide by the terms and conditions outlined in the agreement. This application will form part of the CED Contribution Agreement. I am aware that the information contained herein can be used for the

Sept 2023 Page **6** of **7**

assessment of eligibility and for statistical reporting. I understand that the information in this application may be subject to disclosure. I confirm on behalf of, and with the authority of, the organization that the organization accepts sole responsibility for all costs, including capital and operating costs, related to this project. I acknowledge that I have read and understand the information contained in the CDC CED Fund Application Guide.

Name of Authorized Person (print)	Position/Title	Signature	Date: (dd-mm-yyyy)
Organization President/Chair (print)		Signature	Date: (dd-mm-yyyy)

Sept 2023