



ACTIVE COMMUNITIES INITIATIVE EXPRESSION OF INTEREST APPLICATION

IMPORTANT INFORMATION

For deadlines that fall on a **weekend** or **statutory holiday** applications will be accepted until the end of the next business day.

Incomplete applications will not be considered.

Please keep a copy of this application for your records.

Tourism and Sport – Active Communities Initiative

Section A - Applicant Organization Information:											
Incorporated (Legal) Name of Organization:											
Act the Organization is registered under:											
Corporate Registries #:					Corporate Registration Date:						
Application Contact Person with Signing Authority:			Name:		Organizational Position/Role:						
Daytime Phone:					Email:						
Web Address (URL):					Constituency:						
Street Address:		City/Town:			Postal Code:						
Primary Project Contact:		Title:			Phone #:						
Organizational Mandate:				Board of Directors:							
Previous capital project experience:											
Section B - Facility Information (for projects renovating existing facilities):											
Mission/purpose:											
Sport and Recreation Activities Supported:											
Sport and Recreation Events Hosted:											
Web Address (URL):											
# of Paid Staff:		# of Volunteers:			Annual facility visitation:						
Legal Land Description (PO Box address will not be accepted):											
If the organization does not own the facility, provide the following:											
Will the facility be owned and operated by the organization for a minimum of 5 years after construction? <input type="checkbox"/> Yes <input type="checkbox"/> No											
Term of Lease	Start Date:		End Date		Option to Renew? <input type="checkbox"/> Yes, # of years			<input type="checkbox"/> No			
Section C – Core Project Information											
Project Type		<input type="checkbox"/> Renovation		<input type="checkbox"/> New Construction		Facility Type		<input type="checkbox"/> Indoor		<input type="checkbox"/> Outdoor	<input type="checkbox"/> Indoor and Outdoor
Project Title:				Facility Name:							
Facility Street Address:					Constituency:						
City/Town:				Postal Code:							

Project Purpose:		Project Scope:	
Project Reach: <input type="checkbox"/> Local <input type="checkbox"/> Regional <input type="checkbox"/> Provincial <input type="checkbox"/> National <input type="checkbox"/> International			
Who will primarily benefit from this project?			
<input type="checkbox"/> Children <input type="checkbox"/> Youth <input type="checkbox"/> Adults <input type="checkbox"/> Families <input type="checkbox"/> Women <input type="checkbox"/> Men <input type="checkbox"/> Seniors <input type="checkbox"/> General Public			
Please list any additional groups that will benefit from the project:			
Section D - Project Funding Information			
Estimated Total Project Cost		\$	
Total Government of Alberta funding request:		\$	
Funding Secured from other sources:			
Federal contributions secured		\$	
Municipal contributions secured		\$	
Community fundraising and Value-In-Kind secured		\$	
Corporate support secured		\$	
Total own-source and secured contributions		\$	
Section E - Status of Project Business Case Development:			
Supporting documentation			
Below are some supporting documentation that will be expected for a full application. Do not submit these documents at this time, they will not be reviewed at the Expression of Interest Stage. Please indicate whether you will be able to submit these documents if invited for a full application.			
Can you provide letters of support from the facility title holder or facility operator, as applicable?		<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Can you provide validation of secured funding?		<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Do you have designs and/or architectural drawings for the proposed project?		<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Are you able to provide detailed cost estimates for the proposed project?		<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Business Case Items		Percent readiness/completion:	
Below is a list of some items that will be expected for a full application. Do not submit these documents at this time, they will not be reviewed at the Expression of Interest Stage. Please indicate the current state of readiness/completeness of these items.			

Description of current situation and identification of need.	
Operational Assessment <ul style="list-style-type: none"> • Last audited Year-End Financial Statement • Five Year Post-Budget Operational Budget Projection • Multi-Year Income/Expense trends analysis • Multi-Year Program Participation trends analysis • Operator Agreement and/or Title Holder Agreement 	
Needs Assessment <ul style="list-style-type: none"> • Stakeholder and Community Analysis (demographic and consultation feedback analysis) • Local, regional, and provincial market demand and supply analysis 	
Project Pre-design documentation including: <ul style="list-style-type: none"> • Professional validated asset assessment, architectural drawings, cost estimates • Procurement and Project Management Policy and Governance Plan 	
Detailed Project Budget including: <ul style="list-style-type: none"> • Documentation validating all revenues, expenditures, soft costs, and contingencies. • Cashflow Plan 	
Detailed Project Planning and Construction schedule including: <ul style="list-style-type: none"> • Project Phasing, Key Milestones, and alignment with Budget and Cashflow Plan. 	
Environmental and Climate Change Analysis	
Economic Impact Analysis	
Risk Analysis and Mitigation Plan	
Business Continuity Plan During and After Project	
Letters of Support	

**Active Communities Initiative
Application Declaration**

Incorporated (Legal) Name of Organization (“Organization”):

****All boxes must be checked to proceed****

I hereby acknowledge that:

- The information contained in this application and the accompanying documents is true, accurate and complete.
- I am a representative with designated signing authority/decision-making authority in our Organization.
- The Organization’s Board of Directors is in full support of this application.
- I have read the Conflict of Interest section in the Guidelines and I am not aware of any conflict of interest either perceived or apparent in applying for ACI funding.
- I understand that should this application be approved, the above identified Organization will be required to enter a formal, legally binding agreement with the ministry that will outline the terms and conditions of the grant.

Mr. Mrs. Ms. Other:

Signature of Authorized Representative *Date* *Daytime Phone*

Authorized Representative Name (printed) *Organization Position Title* *Email*

The personal information that is provided on this application form will be used for the purpose of administering the applicable grant program and advising the applicant of Active Communities Initiative Grant program updates and relevant ministry initiatives and resources. It is collected under the authority of section 33(c) of the Freedom of Information and Privacy Act (“FOIP Act”) and is protected by the privacy provisions of the FOIP Act. The FOIP Act applies to

any information that is provided to Alberta Tourism and Sport. This information may be disclosed in response to an access request under the FOIP Act, subject to any applicable exceptions to disclosure under the FOIP Act.

Optional:

I agree to allow, Alberta Tourism and Sport, on occasion, to contact the applicant as identified on this application form to provide information about ministry initiatives or announcements related to the following topics:

- Grant program changes, funding announcements, and opportunities to provide input/opinion on programs; and
- Awareness of ministry resources available to the nonprofit sector, including ministry sector events.