**Application for Na-mi-quai-ni-mak (I remember them) – Community Support Fund**

Instructions: Please fill out the form completely. Once the form is completed, please submit it to:

**The National Centre for Truth and Reconciliation**

177 rue Dysart Road

Winnipeg, MB R3T 2N2

For any questions about the Fund or the application process, please contact Jennifer Wood:

Phone number: 1-431-997-2325, fax: 1-204-474-7533, or via email at Jennifer.Wood@umanitoba.ca.

**Part A: Application Information**

***Note: Payments cannot be made to individuals and require the support of a community organization.***

|  |  |
| --- | --- |
| **Name of Group or Organization:** |  |
| **Cheque Payable to (if different from above):** |  |
| **Contact Person:** |  |
| **Phone Number:** |  |
| **Email Address:** |  |
| **Mailing Address:** |  |
| **City/Town/Reserve:** |  |
| **Province/Territory** |  |

**Part B: Project Information**

Has your community or project received a grant from Na-mi-quai-ni-mak previously?

Yes  No

This project will commemorate (check all that apply):

Residential School Survivors

Residential School Site

Missing Children

Unmarked Graves

Orange Shirt Day

Indigenous Traditional Ceremony or Event

Other:

|  |  |  |  |
| --- | --- | --- | --- |
| **Project Name:** |  | | |
| **Start Date** |  | **End Date:** |  |
| **Brief Description of the Project (200 words or more):** | | | |
|  | | | |
| **If known, please describe any previous commemoration activities in your community:** | | | |
|  | | | |
| **Please list the Residential School(s) commemorated by this project:** | | | |
|  | | | |
| **Please describe how Residential School Survivors have been involved in the planning and delivery of this project:** | | | |
|  | | | |
| **Please describe what health supports will be available during the event (if any) (e.g.: Elders, Community Support Workers, Mental Health supports, etc.):** | | | |
|  | | | |
| **Please describe how you will acknowledge the contribution of the National Centre for Truth and Reconciliation (e.g., newsletter, logo placement, opening remarks, etc.):** | | | |
|  | | | |

**Part C: Budget Information**

Please list ALL costs required to complete your project/event:

***Note: Please indicate where the NCTR funds will be allocated.***

|  |  |
| --- | --- |
| **Project Costs** | **Amount** |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
| **Total Cost** | **$** |

Please list ALL revenue that will help complete your project:

|  |  |
| --- | --- |
| **Revenue Source** | **Amount** |
| NCTR Community Support Fund |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
| **Total Revenue** | **$** |

**Part D: Final Report**

**Complete this section *AFTER* the event has been held and send it in to NCTR to report on the commemoration/event.**

|  |
| --- |
| Please provide a summary of the activity, event or project completed. |
|  |
| How many persons participated in the project? |
|  |
| How did the community, survivors and families benefit from the activity, event, or project? |
|  |

***Note: Please submit photos of the project/event (including Survivors and community members in attendance) and copies of expenses attached to your final report.***

**Additional Notes:**

**Criteria:**

Communities and residential school Survivors know what activities best support healing, memorials, and remembrance within their communities. This program will support them in pursuing the activities they feel are best.

Funds are available to support Indigenous communities, Survivor Organizations, and registered non‐profits. Some possible activities could include, but are not limited to:

* Community‐led healing gatherings;
* Memorial or Commemorative Markers (i.e., healing gardens, murals, carvings, plaques, etc.);
* Ceremonial activities (memorial feasts, giveaways, gatherings, etc.); and
* Maintenance of burial sites (fencing, cutting back overgrowth, etc.).

**Please refer to the section below prior to applying:**

* Must not have had received funds previously from Na‐mi‐quai‐ni‐mak;
* NCTR funds requested must not exceed $10,000.00;
* Must apply through a community organization and have their support (i.e., school, band office, health program, Survivor organization, or registered non-profits);
* Supporting documents must be provided where necessary;
* Location must be publicly accessible;
* Project budget must be clear, concise and include amounts with only allowable expenses (i.e., honorarium for Survivors, Elders, performers, plaques, ceremonial items, rental fees, communications, and reasonable travel costs);
* Must demonstrate inclusion of residential school Survivors in the planning and execution of commemoration and/or gathering; and
* Must identify residential school(s) where Survivors attended.