# Heart&Stroke

# PROGRAM GRANT APPLICATION September 2017- July 2018

# **PROGRAM GRANT APPLICATION**

The Heart and Stroke Foundation is pleased to provide Ontario Living with Stroke host sites with the opportunity to apply for and receive funds to support the hosting of a Living with Stroke Session (6 to 8 weeks in length).

# WHAT IS ELIGIBLE FOR FUNDING?

- 1. <u>Administration costs:</u> up to a maximum of \$ 400 per session.
  - Administration costs include:
    - space rental, photocopying, long distance charges
    - Refreshments: coffee, tea, cookies (no alcoholic beverages)
    - Other expenses that would facilitate hosting such as parking reimbursement
    - Receipts are not required.
- 2. <u>Facilitator honorariums</u>: up to a maximum of \$150 per 6-8 week session for each facilitator (to a max of 2)
  - For facilitators who receive over \$500 in honoraria in a fiscal year you will be asked for your Social Insurance Number for the production of a T4 slip

The total request for funds per cannot exceed \$700 per single program session

# HOW DO I APPLY?

- 1. Please complete the attached grant application and program summary form and send by email to: <u>ON\_LWS@hsf.on.ca</u>
  - For FALL sessions, applications must be received no later than Feb 15, 2018
  - For WINTER/ SPRING sessions, applications must be received no later than July 31, 2018

#### FAXED APPLICATIONS WILL NOT BE PROCESSED



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#### **PROGRAM SUMMARY**

Where was the program hosted (program location and address)?

What were the dates that the program ran?

Total # of participants:

# of Female:

# of Male:

# of stroke survivors:

# of caregivers:

Please share any overall comments about the session. What worked well? What could be improved?

# Heart&Stroke LIVING withSTROKE

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WHO IS THE MAIN CONTACT FOR THIS GRANT? (REQUIRED)
Name:
Email:
Telephone :
Organization name and location :
Program Dates ( start/ finish):
ADMINISTRATION GRANT (NOT TO EXCEED \$400)
Amount requested:
Admin cheque made payable to:
Mailing address for cheque:
Contact email:
HONORARIA #1 (\$150)
Cheque made payable to:
Mailing address:
Contact email:
HONORARIA #2 (\$150)
Cheque made payable to:
Mailing address:
Contact email:
HSF Accounting/ Finance use only (8770-82-500-810-0-0000-000000)

OK to pay Date: Approved by: