APPLICATION FORM – GENERAL

5.2 AGRICULTURE AWARENESS SUB-PROGRAM



JB-PROGRAM	N _s
Date Received (Office Use Only):	
Project/Client # (Office Use Only):	

Step 1 – Application Requirements Checklist

☐ Complete and S	ign Application Form – General			
☐ Complete Project Proposal (Step 9)				
<u>▼</u>	npleted application package (Application Form – General and Project Proposal) to v.pe.ca (See Step 13 for more information)			
Step 2 - Applica	nt Contact Information			
Applicant Name (E	Business Name or Individual Name (including middle name))			
Contact Name				
Secondary Contac	Secondary Contact			
Email				
Phone Number	Alt. Phone Number			
Mailing Address				
City/Town/Village				
Province	Postal Code			

Step 3 – Type of Business or Organization (Choose one and complete the required Social Insurance, Business, or Registration Number)

Individual Proprietorship Social Insurance Number:				
Incorporated Company				
Revenue Canada Business N	Number:			
Partnership				
Revenue Canada Business N	Number:			
Registered Charitable Orga Registration Number:	anization /	Not-for-Profit		

Step 4 - Partnerships (If you indicated "Partnerships" as your type of business in Step 5, please list the partner name(s) and their ownership per cent in the table below). Name all partners (for partnerships) Per cent of ownership Total (must total 100%) Step 5 - Project Information **Project Title: Project Start Date Project End Date** Step 6 – Additional Sources of Project Funding Have you, or will you, secure any other Provincial and/or Federal Government Funding for this project? ☐ Yes □ No If yes, please provide detailed information as indicated below **Source Dollar Amount** Step 7 - Recipient Type (Applicant chooses one of the following options). ☐ Processor ☐ Primary Producer ☐ Industry Organizations ☐ Research Body (Institution) ☐ Retailer/Wholesaler ☐ Provincial/Territorial/Municipal Government ☐ Service Provider ☐ Indigenous (First Nations, Inuit, Métis) Group (government, community, and/or including Tribal Councils, associations, organizations) ☐ Student ☐ Educational Institution

Step 8 – Primary Type of Industry (I.e. Dairy, potato, beef, hog, grains and oilseeds).				

Step 9 – Project Proposal (1-2 pages)
Please use the topics below as the subject headings of your proposal

Cover Dege	Include the project title, expected start and and date of the project, and your contact information
Cover Page	Include the project title, expected start and end date of the project, and your contact information.
Executive	Provide a summary of the industry organization and the conditions leading to this project.
Summary	
Project	Describe the issue your project is designed to address and the project's final objectives.
Objectives	
Timeline	Identify the project's timeline and activities (including submission of the project's final report). Include the activity's description, any person(s) or organizations associated with the activity and the activity's start and end date.
Results	State the expected commercial and/or economic benefits to members of your industry. Also, please note if there are positive environmental impacts expected because of this project.
Sustainable	The Agriculture Awareness Program will contribute to the Sustainable CAP outcome of
CAP Outcome	enhancing Sector resiliency, diversity, equity and inclusion, and public trust. Please describe how your project will positively contribute to this specific outcome.
Budget	Identify total project costs and funding requested from the program.
Evaluation	How will you measure whether the project investments and activities achieved the objective of this project? How will you measure progress made toward achieving the project objective? How will you communicate the evaluation results?
Communication	Please describe how you intend to recognize the support of the Department in communication
of Support (if applicable)	material related to the project.

Step 10 – Declaration and Consent to Personal Information

By submitting this form for project funding, I/We:

- understand that personal information on this form is collected under Section 31c of the Freedom of Information and Protection of Privacy Act R.S.P.E.I. 1988 c. F-15.01 as it relates directly to and is necessary for the Sustainable Canadian Agricultural Partnership program being delivered as part of the Canada-Prince Edward Island Sustainable Canadian Agricultural Partnership Framework and Bilateral Agreement. It will be used for determining eligibility for program assistance and will be shared with the Canada Revenue Agency regarding the taxable benefit and Agriculture and Agri-Food Canada, regarding program management, claims, audits, and evaluation of this program;
- agree that information provided for purposes of the Sustainable Canadian Agricultural Partnership may be shared with the Canada Revenue Agency as it pertains to any potential taxable benefits, as well as with Agriculture and Agri-Food Canada or its agent regarding claims, audits and evaluations as it relates directly to and is necessary for this contract being delivered as part of the Canada-Prince Edward Island Sustainable Canadian Agricultural Partnership Framework and Bilateral Agreements;
- agree to participate in an evaluation and/or audit of the program;
- understand that projects funded may be communicated through the Department's public and social media channels;
- understand that failing to comply with all application requirements may delay the processing of the application, or may render me ineligible for receiving assistance under the program;
- understand that the Social Insurance Number, Business Number and/or Charity Registration Number is collected under the authority of the *Income Tax Act* for the purposes of reporting income;
- acknowledge that my/our completing this application form and by receiving advice from the PEI Department of Agriculture or other program delivery agent does not oblige the PEI Department of Agriculture or other delivery agents to provide funding;
- understand that expenses incurred prior to the submission of an approved application are not eligible for assistance under this program; and
- agree that a completed Final Report including financial verification will be provided to the Department via email within 60 days of the completion of the project.

certify that the information given on this application is to the best of my knowledge complete, true and accurate.				
Name of Applicant/Signing Officer (Please print)	Signature of Applicant/Signing Officer	Date (yy/mm/dd)		

Step 11 – Applicant Demographic InformationYour response to the following questions will assist the Department in Understanding demographic profile of Sustainable CAP clients.

profile of Sustain	iable CAP clients.						
Please select which	ch gender you identify a	IS					
☐ Man	□ Woman	□ Non-binary	☐ Gender r	not listed		☐ Prefer not to say	
What is your first la	anguage?						
☐ English	☐ French		Other			☐ Prefer not to say	
• •	in languages other thar	n English or Fren	ch?	☐ Yes	☐ No	☐ Prefer not to say	
Are you a senior (a	<u> </u>			☐ Yes	□ No	☐ Prefer not to say	
Are you a youth (a	,			☐ Yes	☐ No	☐ Prefer not to say	
Do you identify as							
Person with a disa				☐ Yes	☐ No	☐ Prefer not to say	
	and's Acadian commun	ity'?		☐ Yes	☐ No	☐ Prefer not to say	
Member of an Indi	<u> </u>			☐ Yes	☐ No	☐ Prefer not to say	
Newcomer to Cana		-		☐ Yes	□ No	☐ Prefer not to say	
Part of another und	der-represented group	?		☐ Yes	☐ No	☐ Prefer not to say	
Step 12 – Company/Organization Demographic 1a) Is your company/organization owned (50% or more ☐ Indigenous Person/Persons – First Nations ☐ Indigenous Person/Persons – Métis ☐ Woman/Women ☐ Person(s) with disabilities ☐ Gender Parity (50% women and/or non-binary people or more) ☐ Decline to Identify			e) by one of the following groups? Select all that apply. ☐ Indigenous Person/Persons – Inuit ☐ Indigenous Person/Persons – Unknown/Unsure ☐ Youth ☐ Visible minority(ies) ☐ Not applicable				
(30% or more) from ☐ Indigenous Pers ☐ Indigenous Pers ☐ Woman/Women ☐ Person(s) with o	disabilities 50% women and/or nor	following groups tions	s? Select all tha ☐ Indigenous F	et apply. Person/Person	ersons –	•	
apply. ☐ Indigenous Pers ☐ Indigenous Pers ☐ Woman/Women		_	☐ Indigenous F☐ Indigenous F☐ Youth	Person/Pe Person/Pe	ersons – I		
☐ Person(s) with o	disabilities		☐ Visible minor				
☐ Not applicable			□ Decline to Id	enny			

Step 13 – Submitting the Application

Please complete the required Project Proposal and submit together with the general application.

Completed applications may be submitted to the attention of the Program Officer via regular mail or email

Email Applications:

Once you have completed the application, you may email a <u>signed</u> copy in PDF to the *Agriculture Awareness Sub-Program* at <u>agawareness@gov.pe.ca</u> Please include the program name in the subject line.

Regular Mail Applications:

Applications may be submitted via regular mail at: PEI Department of Agriculture
11 Kent Street
PO Box 2000
Charlottetown PE C1A 7N8
(902) 368-4880 (telephone)

Questions?

Please email the Agriculture Awareness Sub-Program at agawareness@gov.pe.ca