

Alberta CAPC/CPNP Coalition*

Capacity Building Application and Report Forms

Submit to: Crystal Nahaiowski

E-mail: crystal.nahaiowski@candorasociety.com

Fax: 780 474-5041. If faxing, please notify Candora via e-mail or phone that application has been sent.

For information or clarification: 780, 474-5011 ext. 104

Background

The Public Health Agency of Canada currently provides annual financial support for CAPC/CPNP Coalition projects. Two Alberta projects have been named as bankers for these funds: Candora Society of Edmonton and Alberta Parenting for the Future.

The Candora Society currently oversees funds available for Project Capacity Building Activities.

- The total amount available for capacity-building projects from April 1, 2022 to March 31, 2023 is \$45,000.
- Each CAPC and CPNP project is allowed to apply for up to \$3,000 per year, per project on a first-come basis, until the fund is fully spent. Awarded funds for a project must be used during the current fiscal year.
- Applications are reviewed in the order they are received.
- Applications for training/events not previously approved by the Board are circulated to all board members for approval.
- Applications may take up to two weeks to be processed. Please contact Candora if you have not received notification after two weeks.
- It is strongly recommended that projects submit their application prior to the training/activity and the spending of any funds. Projects submitting applications following the actual training/activity accept the possibility that they may not receive any funding from the Coalition fund. In this case, the project would be responsible for any costs the project incurs related to the training/activity.
- Unexpensed funds over \$100 must be returned to Candora as soon as possible and must be received prior to March 31 (fiscal year end).
- Unexpensed amounts up to \$100 can be utilized by the project for capacity building resources or activities. Receipts must be submitted and identified in the required activity follow-up report.

*CAPC = Community Action Programs for Children

*CPNP = Canada Prenatal Nutrition Programs

Revised: December 13, 2022

Application for Alberta Coalition Capacity Building Funds

Note: Applications for multiple training/activities MUST be submitted on separate forms. Designate your priority for approval #1, #2, etc. for applications submitted at the same time.

Priority for Multiple Applications (i.e., 1 of 3): _____

Please answer all questions

Project Name (on your PHAC contract):

Project Number:

CAPC funded: *CPNP funded:*

Project Address:

Cheque to be issued to:

Address (if different than project address):

Contact name:

E-mail:

Phone (work):

Phone (mobile):

Name or brief description of activity:

Date being held:

Estimated number of people attending:

Anticipated benefits of attendance:

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Budget

Category	Amount
Registration	
Travel	
Air	
Bus	
Mileage (.51/km)	
Taxi	
Accommodation	
Hotel/Motel	
Private (\$30/night)	
Meals	
Bkfst/Lunch \$15	
Dinner \$25	
Hosted events	
Speaker/Facilitator	
Rent	
Food	
Other (printing, training materials)	
TOTAL	

	Amount	Code
Registration		
Travel		
Accommodation		
Meals		
Speaker/facilitator		
Rent		

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Other		
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For office use only

Follow-Up Report

MUST be submitted within 1 month of event date. Funding for future applications will depend on receipt of the follow-up report.

Project Name:

Project Number:

Name of Conference/Workshop or Activity:

Submitted by:

Contact information (phone/e-mail):

Budget

<i>Category</i>	<i>Budget</i>	<i>Actual</i>	<i>Difference</i>
Registration			
Travel			
Air			
Bus			
Mileage (.40/km)			
Taxi			
Accommodation			
Hotel/Motel			
Private (\$30/night)			
Meals			

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Bkfst/Lunch \$15			
Dinner \$25			
Hosted events			
Speaker/Facilitator			
Rent			
Food			
Other (printing, training materials)			
TOTAL			

If balance remaining is over \$100 submit a cheque to:

The Candora Society of Edmonton
 #262, 3210 - 118 Avenue
 Edmonton, AB, T5W 4S9
 Attn: Crystal

If balance remaining is less than \$100, submit receipts for how funds were expended.

Evaluation

(Please complete this section too)

Workshop/Conference/Activity Name:

Date held:

Number of individuals from the project that attended:

Contact information for presentations:

Resources or website relevant to this conference/workshop or activity:

Rating:

On the following questions, rate the workshop/conference/activity from **1** (not recommended, not valuable, little skill) to **5** (highly recommend, very valuable, excellent skill)

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	1	2	3	4	5
Would you recommend this to other projects?					
How valuable to your work was the activity/event/information?					
Please rate the presenters' overall skill, knowledge and presentation.					

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Comments: How will your project and/or participants benefit from staff having attended this activity?

Comments: Information you would like to share with others about this activity.

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