



**APPLICATION FORM
Lake Stewardship Grant Program**

Request for Funding 2014

**Before submitting your application, ensure you have read the
Lake Stewardship Grant Program Funding Guidelines.**

Please fill in all required fields. Applications must be received to the addresses below no later than Friday, May 9, 2014.

Mail or deliver to: Lake Water Quality Program
Environmental Planning Initiatives, 2nd Floor
City of Greater Sudbury
200 Brady Street, PO Box 5000, Station A
Sudbury, ON P3A 5P3

E-Mail to: lakewaterquality@greatersudbury.ca
Fax to: 705-673-2200
Telephone: 705-674-4455, ext. 4604

Lake Stewardship Contact Information (1 point)

Name of Organization:

Lead Contact Person:

Role in the Organization:

Mailing Address:

Telephone (Day):

Your Email Address:

Website Web and Email Address (if applicable):

Alternate Contact Person:

Alternate Telephone:

Alternate Email:

Project Information (2 points)

Project Name:

Project Location

Lake Name:

Township(s):

Watershed(s):

Land Ownership: (1 point)

Private Crown Conservation Authority Municipal Other:

Anticipated Dates of your Project: (1 point)

Start Date:

End Date:

Project Evaluation

Purpose of your project: (6 points)

Explain what you will accomplish with this funding.

Measured Results: (6 points)

Explain how your lake stewardship group will measure the results of your project. Describe the environmental benefits that will be realized through your project.

Project Team: (3 points)

Who will work on your project (volunteers, residents, business, industry)? List the number of volunteers and other members.

Other Relevant Information

Attach any additional information you feel is important to your application (maps, photos, news articles, etc.)

Organization Agreement (2 points)

On behalf and with authority of the lake stewardship group, we certify that we have read, understand and agree to abide by the terms of the City of Greater Sudbury's Lake Stewardship Grant Program. We also confirm that the information provided in this application form is accurate and that we have the authority to sign on behalf of my organization.

Application must be signed and dated by two members or representatives who will be responsible for the project.

Name:

Title:

Signature:

Date:

Contact Information:

Name:

Title:

Signature:

Date:

Contact Information: