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**Consumer Initiative Fund**

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**CIF Project Proposal Application Form**

Please use the following headings and address each category separately in the written proposal:

**Applicant Information**

Please introduce yourself and explain why you are passionate about this project. What are your relevant qualifications (work/volunteer experience, group facilitation, website design, etc.)?

Please also provide your contact information.

Name:

Phone:

Email:

Mailing Address:

**Name of Project**

A short descriptive name for the project, no more than 5 words.

**Description of the Project**

Why is this project a good fit for the CIF? Who do you hope will participate in the project? How many people do you think will attend? How will people grow by being involved in the project?

**Summary of Project**

Write a brief one or two paragraph Summary (to be used on our website). Include project details based on the Description, but do not include names.

**Objectives** **/Goals**

What is your goal or objective? What is the need or demand that this project will try to meet? What do you hope to achieve with the project?

**Strategies/Activities**

What work is involved and is this manageable and achievable? Are there different sections to the project (i.e. start up and development, running project, project ending)? How will you measure outcomes to know if you have accomplished your goals? Will you be partnering with other agencies and how will this work?

**Back-up Plan**

How would the project continue should you become unable to fulfill a part, or perhaps all of your entire contract? E.g. you become sick, hospitalized, or called away on family business.

**Marketing**

How will you get the word out about your project? Are there specific ways that you can appeal to people? How will you get people interested to take part?

**Resources**

What space will you use to run the project? What materials do you need for the project (i.e. workbooks, art supplies, exercise equipment, etc.)? Will the project be using more than the Project Leader (i.e. co-leader, assistant, resource specialist, etc).

**Timeframe**

How long will your project run? Circle or underline one:

**12 month project**

(funding up to $8000)

**6 month project**

(funding up to $4000)

Please identify specific markers within your project time frame (how you will know you are on track to finish the project on time). Please include a section on how you will measure outcomes of the project. Projects are either 6 months or 12 months.

|  |  |
| --- | --- |
| **Dates** | **Activity** |
| Month 1 | Project start |
| Month 2 |  |
| Month 3 |  |
| Month 4 |  |
| Month 5 |  |
| Month 6 | 6 Month Project End & Final Report Due: by the end of Month 6 |
| Month 7 |  |
| Month 8 |  |
| Month 9 |  |
| Month 10 |  |
| Month 11 |  |
| Month 12 | 12 Month Project End & Final Report Due: by the end of Month 12 |

**Budget**

How much are you asking for? How will the funds be spent (fees for service, rent, expenses, supplies)? What is the number of hours that will be devoted to the project? Please allow 10% of full budget for unexpected expenses.

Budget may be up to $4,000 for a 6 month project, and up to $8,000 for a 12 month project.

The amount budgeted for “Total Fees for Service” must not exceed 65% of the total budget. For a 6 month project, the maximum Fees for Service is $2600. For a 12 month project, the maximum Fees for Service is $5200.

Visit <https://spotlightonmentalhealth.com/consumer-initiative-fund/projects/> to download the budget PDF.

Sample hourly rates and hours are filled in in the budget form as defaults; these may be changed.

**Additional Requirements**

Please provide two letters of character reference in support of you as project leader (attach copies to the proposal).

Please add or attach any additional information that you would like considered to the proposal.

**Proposal Rating Criteria**

**The following criteria will be used to rate proposals:**

Applicant Information and Description of Project 30 points

Objectives/Goals and Strategies/Activities/Backup Plan 25 points

Marketing, Resources, Timeframe, Budget and References 40 points

Overall Organization and Presentation of Proposal 5 points

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Total possible score 100 points

All proposals will be reviewed and acknowledged. Leaders of projects that will be funded will be notified.

Project Leaders and Assistants will be required to fill out a Criminal Record Check form – two pieces of ID are required (one a government issued picture ID). The project may not start until CIF receives the results of the record check and contracts have been signed. For taxation purposes your SIN number is also required.

**Submit Proposals**

Mail to or drop off at:

Consumer Initiative Fund Office

200 - 520 W 6th Ave

Vancouver, BC V5Z 4H5

Email: [Megan.Brummitt@vch.ca](mailto:Megan.Brummitt@vch.ca)

Fax: 604-874-7661

**Any questions? Please contact:**

Megan Brummitt

Coordinator, Consumer Initiative Fund

604-730-7675

[Megan.Brummitt@vch.ca](mailto:Megan.Brummitt@vch.ca)

*The* ***Consumer Initiative Fund*** *strives to* ***empower*** *those with mental health*

*and/or substance use challenges* ***through meaningful involvement***