



Calgary Learns 2020-21 Disability Program Grant Application General Application


Prior to filling out this application, please check the [Disability Program and Initiative Grant Call for Applications](#).

Please submit your application to grants@calgarylearns.com.

Disability Program Grant applications are due May 1, 2020.

SAMPLE

Funding support provided by

Alberta  Advanced Education

IMPORTANT**COMPLETE THIS CHECKLIST BEFORE SUBMITTING YOUR APPLICATION**

Complete and click all the boxes in the left column before submitting your application

STEP ONE: Check Eligibility of Applicant and Program	
<input type="checkbox"/>	The organization is a legal entity incorporated for a minimum of two years under one of the following Alberta Statutes: the Societies Act, Part 9 of the Companies Act, the Libraries Act, the Métis Settlements Act, and the Postsecondary Learning Act.
<input type="checkbox"/>	The program operates between July 1, 2020 to June 30, 2021, and within Calgary city limits.
<input type="checkbox"/>	The program targets financially and socially barriered adults (18+) in Calgary who are permanent residents or citizens of Canada.
<input type="checkbox"/>	The program addresses a current foundational literacy and learning need for adults with disabilities and does not unnecessarily replicate locally available learning opportunities.
<input type="checkbox"/>	The program is non-credit and part-time.
<input type="checkbox"/>	The program is covered under the applying organization's current liability insurance.
<input type="checkbox"/>	All program staff and volunteers who work with vulnerable program participants have appropriate security clearances.
STEP TWO: Compile a Complete Application to be Considered	
<input type="checkbox"/>	The completed Application Form (this document) in Microsoft Word
<input type="checkbox"/>	The completed Budget in Excel (found here or at www.calgarylearns.com)
<input type="checkbox"/>	A copy of the Financial Statement for the organization's last completed fiscal year, which includes at least a statement of financial position (formerly 'balance sheet') and statement of operations (formerly 'income statement'), showing the organization's name and fiscal year
<input type="checkbox"/>	A copy of the current General Liability Insurance Coverage in an amount of no less than \$2,000,000 inclusive per occurrence, insuring against bodily injury, personal injury and property damage including loss of use
<input type="checkbox"/>	Proof of submission of the most recently filed annual returns with Alberta Corporate Registry
<input type="checkbox"/>	Declaration and Authorization page (last page of this application) with signatures in PDF Format
STEP THREE: Submit a Complete Application	
<input type="checkbox"/>	Email your application package in the formats listed above to the Grant Coordinator (grants@calgarylearns.com) by May 1, 2020

ORGANIZATION OVERVIEW

1. Complete the requested organizational information below.

Organization Legal Name	
Operating Name (if different from legal name)	
Charity Number or Incorporation Number	
Mailing Address	
Physical Address (if different)	
Website	

Organization Primary Contact *If approved, grant cheques will be addressed to this individual	
Position/Title	
Email	
Phone	

Organization's Annual Operating Budget	Program Budget *Amount must match the program <u>Total Cash Expenses</u> as indicated on the Program Budget	Program Funding Request *Amount must match the Calgary Learns funding request under the <u>Revenue</u> section of the Program Budget

Recipients of Community Adult Learning Program funding are bound by the Personal Information Protection Act (PIPA). One of the requirements under PIPA is to ensure the protection of personal information of clients accessing programs and services. Does the organization have processes in place to ensure the protection of personal information of learners that access programs and services?	<input type="checkbox"/> Yes <input type="checkbox"/> No
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2. Organizational mission statement

3. Brief organizational background (history, strategic priorities, programs) **150 words maximum**

PROGRAM OVERVIEW

4. Complete the requested program information below.

Program Name	
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Program Lead Contact	Name	
	Position/Title	
	Email	
	Phone	

5. Provide a concise summary of the proposed program in plain language. Explain what will happen and how. **100 words maximum**

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6. Provide current and relevant evidence to support that this program is needed in Calgary.

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7. How does this proposed program fit in with your organizational strategic goals and priorities?

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8. How does this program connect with other adult literacy and foundational learning opportunities in Calgary? What pathways/scaffoldings are created for your learners to transition into new programs or opportunities? Include examples of knowledgeable program referrals or strategic partnerships with other organizations.

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9. Select the relevant Literacy and Foundational Learning (LFL) category:

- | | |
|---|---|
| <input type="checkbox"/> Adult Literacy | <input type="checkbox"/> Basic Digital Skills |
| <input type="checkbox"/> Numeracy | <input type="checkbox"/> Foundational Life Skills |

IF YOU SELECTED MORE THAN ONE AREA OR CATEGORY, YOU REQUIRE SEPARATE APPLICATIONS.

10. What are the top 3 to 5 measurable learning objectives specific to the program?

Learning Objectives	How will these be measured? (evaluation tools and process)
Learners will...	

Learners will	
Learners will	
Learners will	
Learners will	

11. Describe your process to ensure that the learners or the entire group of learners accessing this program are financially barriered.

PROGRAM DESIGN

12. How does the program recruit adults with disabilities learning at a foundational level to the program? How are the adult learners confirmed as foundational-level learners?

13. How will the program work with learners to identify their individual learning needs?

14. Tell us about your approach to literacy and foundational skill development.

15. What instructional materials and learning activities will the program use to help foundational learners achieve their desired goals? Include the types of activities learners will be engaged in, strategies to support adult learners and supports to address barriers.

16. Please list any program partnerships relevant to this application, include letters of support.

Not Relevant)

PROGRAM DELIVERY

17. Where will the program(s) be held? Please include the location(s) and address(es).

18. List the program staff and volunteer position and provide their qualifications, foundational learning and disability experience, and key responsibilities relevant to the program. The below list must correspond with the Human Resources (HR) Breakdown and honoraria expense on the Budget.

Add or delete rows as needed

Paid Staff Positions	Paid Staff Qualifications	Paid Staff Primary Responsibility
Volunteer Positions	Volunteer Training Provided and Required Qualifications	Volunteer Primary Responsibility
Other Positions (Elders, Guest Speakers)	Details	Primary Responsibility

FOR THE REMAINDER OF THIS PROGRAM DELIVERY SECTION, PLEASE CHOOSE ONE OF THESE OPTIONS:

- If this application includes one program which is delivered as a course answer questions 19 to 23. Then proceed to the next section (Program Evaluation).
- If this application includes one program which is delivered as tutoring, answer questions 24 to 26. Then proceed to the next section (Program Evaluation).

Courses

19. What is the projected length of a typical individual class in your program? For example, 2 hours.

20. What is the total projected number of hours of instruction that a learner will receive in a program? For example, for 2 hours delivered weekly for 10 weeks, you would record 20 hours (2 hours x 10 weeks = 20 hours total).

21. What is the total projected hours needed for a facilitator to prepare for a program? For example, for 1 hour of preparation for a 2-hour class for 10 weeks, you would record 10 hours (1 hour of prep x 10 weeks of delivery = 10 hours total prep time).

22. How many times is the program projected to be offered in the funding term? For example, if the same program is offered 3 times in the funding year, you would record 3 times.

23. How many learners are projected to participate in all the offerings of the program? For example, if 12 learners participate in each offering and the program is delivered 3 times, you would record 36 learners (12 learners per program offering x 3 offerings = 36 learners total)

TUTORING

24. What are the total projected hours of direct tutoring that the learners will receive tutoring? Examples: one-on-one tutoring, if 5 learners work individually with a tutor for 2 hours per week for 10 weeks, you would record 100 hours (5 learners x 2 hours x 10 weeks = 100 hours total). Small group tutoring, if one tutor works simultaneously with 5 learners on their individualized learning plans for 2 hours for 10 weeks, you would record 20 hours (2 hours x 10 weeks = 20 hours total).

25. How many unique learners are projected to be served through tutoring in the grant term? i.e. does not include repeat learners in the funding cycle.

26. How many unique volunteer or paid tutors will serve in your program in the grant term?

REQUIRED OUTCOME MEASUREMENT AND EVALUATION

All successful applicants will have to collect Outcome Measurement and Evaluation (OME) data, as defined and prescribed by the Ministry of Advanced Education. You can access more information and examples in the [CALP Data Collection Guidelines](#).

27. Will the program use the same evaluation tools and processes noted in question 10 to track and measure the following OME data?

- Skill Use Yes No If no, how will you collect?

- Learner Progress Yes No If no, how will you collect?

- Increased Confidence Yes No If no, how will you collect?

- Program Relevance Yes No If no, how will you collect?

- Welcoming Space Yes No If no, how will you collect?

- Reduced Barriers Yes No If no, how will you collect?

SECURITY CLEARANCE

All staff and volunteers who work with or have the potential for unsupervised access to program participants or personal information of vulnerable persons must have security clearance.

28. Do all staff and volunteers have a Vulnerable Sector Check? Yes No

PROGRAM BUDGET

In order for your application to be considered complete, a detailed projected Program Budget listing all revenue and expenses is required on the [Calgary Learns Budget template](#).

Please keep a copy of the Budget because if successful, you will be required to submit the actuals using the same form in the Final Report package.

DECLARATION AND AUTHORIZATION

Organization Name	
Program/Project	
Year	

I declare that the information provided in the Application Package is true and accurate and does not omit any material detail.

I authorize Calgary Learns to share information provided in the application package with their external review team and funder (Alberta Advanced Education).

I have read, understand and agree to abide by the program funding and reporting requirements set out in Calgary Learns' Call for Application and application.

I certify that if funds are awarded, they will only be used as set forth in this application package and understand that unused funds must be returned to Calgary Learns.

I confirm that the organization adheres to the Personal Information Protection Act (PIPA) to ensure the protection of adult learners accessing our programs.

I understand that I must submit to Calgary Learns a copy of any materials produced as a result of Calgary Learns funding and allow Calgary Learns to make these materials available publicly.

I confirm that in the event of a Calgary Learns funding audit, auditors will have access to all records pertaining to the grant.

Must be signed by two signatories of the organization

Executive Director or CEO:

Name		Position/Title	
Email		Phone	

Signature _____ Date: _____

Program Lead Contact or Board Member:

Name		Position/Title	
Email		Phone	

Signature _____ Date: _____