

This checklist is for your convenience. You are not required to submit it with your application form.

Phone: 867-920-3843

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- ☐ **A** – Contact Information
- ☐ **B** – Organization Information:
 - B – Part 1:** Lead Organization Information
 - B – Part 2:** Operating Partner Contribution and Information (if applicable)
 - B – Part 3:** External Funder Information (if applicable)
- ☐ **C** – OHS Initiative Information:
 - C – Part 1:** Description and Purpose
 - C – Part 2:** Initiative (Plan, Preparation, Promotion, Delivery, Measuring Success)
 - C – Part 3:** Timeline
 - C – Part 4:** Delivery Team
 - C – Part 5:** Budget Proposal Worksheet

☐ **D** – Declaration of Conflict of Interest (if applicable)

☐ **E** – Terms and Conditions of Application

☐ **F** – Declarations

☐ (If applicable) I have included a supplementary document for sections where I needed more space.

- **REQUIRED:**
 - ☐ Two (2) signed letters as evidence of the organization's experience and expertise.
 - ☐ Resumé for the Delivery Team Lead
- **IF APPLICABLE:**
 - ☐ The Operating Partner's Certificate of Corporate Registry
 - ☐ A signed letter from the Operating Partner confirming their contribution
 - ☐ Information for additional Delivery Team Members
 - ☐ Resumés for the Delivery Team Co-Lead(s)
 - ☐ Past year's audited financial statements (if total initiative funding request is more than \$50,000, or applying for either multi-year or advanced funding)

☐ Resumés for other Delivery Team members

☐ Other supporting documents that you choose to include

☐ For funding requests of more than \$50 000: I have included my signature and the signature of the Chief Executive Officer.