2026 Grant Application

For the Funding Year running April 1, 2026 to March 31, 2027

* Indicates required question

1.	Email *			

Information and Tips

When you click submit, the application will be forwarded to Brant United Way and a copy will also be sent to the email provided at the start of the application. Be sure to check your spam folder.

In this email you will see a link that can be clicked to access the application and make changes/revisions that may be required.

You can update the application until the deadline. You will not be able to make any changes or revisions after the deadline date.

If you have any questions, please feel free to contact us at info@brantunitedway.org

Helpful Tips:

Answer Every Question

We know this might sound straight forward, but you will be limiting the chances of your application being successful if you skip questions, or if you don't truly answer the question that is being asked and instead provide information that doesn't directly connect to the question as written.

Clear, Simple, and Straight-forward

The best responses are ones that include plain, everyday language. Avoid writing your answer in a way that would require a volunteer to access additional resources, or make too many assumptions about what you are trying to say. When you do feel you need to use an unfamiliar term or concept, make sure that you provide a plain, concise and easy to understand explanation.

Use a Gmail Account

You don't need to use a Gmail account, but it will certainly help. If you login using a Gmail account, the application will auto-save as you are completing it, preserving your work in the event something happens. It will also allow you to complete a portion of the application and come back to complete the rest at another time.

If you choose not to login using a Gmail account, the application cannot be saved until you click "Submit", so you would need to complete the application all at one time.

Thank you.

Program or Service Information

	lame of program or service	
Ν	lame of Organization	
Т	ype of Organization	
Ν	fark only one oval.	
(Registered Charity	
(Non Profit	
(Othor	
	Other.	
G	Grant Request Amount	
	·	
Α	pproximate number of people helped	

Program/Service Overview

7.	Describe your organization's mission and purpose				
8.	Please describe the proposed project/service that you are requesting funds for				
9.	How does this project/service align with your organization's mission and purpose?				
10.	What is the need in the community that this service/program will address?				

11.	How will the service/program address this need and make things better?
12.	Describe the <i>experience</i> of the service/program from the <i>perspective</i> of the people who will be helped (describe it from their perspective):
13.	Please demonstrate the impact of this program / How you know it helps people. (For example: Quotes from past participants, staff, survey results)
Se	ction Organization/Program Details
14.	Which community is this program primarily serving?
	Mark only one oval.
	Brantford
	Brant County
	Six Nations of The Grand River

How do you plan to track, evaluate and report on the success of your program? What credentials/resources/expertise does your organization have that best suit you to deliver this program/service?	Describe any potential barriers or limitations to accessing the service (is there a formation of the service) do clients need to fill out applications, are there limits to the service, is transportation a barrier)? Please explain:
What credentials/resources/expertise does your organization have that best suit	
What credentials/resources/expertise does your organization have that best suit	
	How do you plan to track, evaluate and report on the success of your program?
	What credentials/resources/expertise does your organization have that best suit you to deliver this program/service?

18.	Is a similar program or service currently offered by other organizations? If so, how are you ensuring efforts are not duplicated – or are you collaborating with others?					
Вι	dget					
19.	How much will this service cost to operate for one year?					
20.	Please list your funding sources (for this program) along with estimated revenue for each, including your request for a Brant United Way Grant					
21.	Please list your total anticipated revenue for this program/service					

22.	Please list your operating expenses for this program / service. (administration, staffing, program expenses
23.	Please state your anticipated total expenses for this program/service
24.	Please state the overall budget for your organization as a whole (not the program specifically)
Fin	nal questions
25.	Is your organization running a deficit this year? If so please explain

26.	Please provide any additional information or details about your organization, program or service that you feel are relevant to our decision making
27.	If you receive a grant this year, how will Brant United Way's support be recognized?
Co	ntact details
28.	Registered Charity Number
29.	Contact Name

•	Contact Email Address *
	Organization address and phone number
	Organization address and phone number
	Organization address and phone number
•	Organization address and phone number
	Organization address and phone number

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