

### Criteria for Family Literacy project funding

- ✓ Your project must benefit children aged 0-6 years old along with primary caregivers.
- ✓ Your project must be managed or delivered by someone that has taken Family Literacy training from the NWT Literacy Council.
- ✓ Your application will be assessed on one of the following dates:
  - o June 14, 2024
  - o October 18, 2024
  - o December 13, 2024
  - All applications must be received before the assessment date to be considered in that quarter.
- ✓ Projects must be completed by March 31, 2025.
- ✓ Organizations who have facilitated Family Literacy programing for 5 or more years may apply for up to \$5000. A total of 8 projects will be funded with \$5000.
- ✓ All other organizations may apply for up to \$3000.
- ✓ We cannot make project cheques out to individuals, so you must work with an established organization that will take responsibility for handling the project funds.



- ✓ A representative with the signing authority will need to sign a funding agreement before the organization will receive funding.
- ✓ Funding recipients must acknowledge the NWT Literacy Council in promotional items such as posters and social media posts. NWT Literacy Council logo images may be requested.
- ✓ At the end of your project, you must complete the *Family Literacy Project Funding* report form and submit it to the NWTLC by **April 15, 2025**.
- ✓ We ask that you send us at least <u>one photo</u> of your project activities. These photos will be used in NWTLC reporting, and may be used in resources, on our website and social media. Please make sure that everyone in the photo has given you permission to share it with the NWTLC. Permission forms are included in the NWTLC Community Literacy Facilitators' Guide.
- ✓ You may be contacted by NWTLC's external evaluator to participate in annual and/or three-year evaluations. These evaluations are very important for NWTLC to improve programs and continue seeking funds and require feedback from all facilitators.



Name and Address				
Today's date: Click here to enter a date. Name of organization to whom the cheque should be made out: Click here to enter text.	Who is managing the program? Click here to enter text. Who is delivering the program? Click here to enter text.			
Mailing address: Click here to enter text.	Phone: Click here to enter text.  Fax: Click here to enter text.  E-mail: Click here to enter text.			
If your funding is approved, you will receive your funding letter and cheque at the mailing address above. However, if you would like to receive the rest of your paperwork (report form and evaluation how-to-kit) by email, please check the box below:  □ I want to receive my report form and evaluation how-to-kit by email.				
Name of person with family literacy training: Click here to enter text.  How will this person be involved with the project? Click here to enter text.				
Where were they trained? Click here to ente text.	When? Click here to enter text.			
Information about your project				
Program dates - if known. Programs must be completed by March 31, 2025.  Click here to enter text.				
Number of weeks: Click here to enter text.	Number of hours per week: Click here to enter text.			
Program location in the community (i.e. Friendship Centre, daycare): Click here to enter text.				
Maximum number of participants: Adults: Click here to enter text. Children: Click here to enter text.				



Which families will benefit from this project? Please check all the boxes that apply.					
Children and caregivers of children aged:					
□ 0-2 years □ 2-4 years □ 4-6 years □ all the children aged 0-6 in the community					
What kind of family literacy project will this be? Please check all the boxes that apply.					
☐ 1-2-3 Rhyme with Me	☐ Little Chefs				
☐ StoryWalks© or Storysacks	☐ Science Fun				
☐ Storytime Adventures	☐ Take A Break (specific training required)				
Other: Click here to enter text.					
Please describe your project (outline how Family Li singing, reading, and/or playing).	teracy will be supported through talking,				



#### Your partners

Please list your partners and what they will do for the project.

I.e. Daycare – will donate space for the program.

Click here to enter text.

#### Submit your application

If you need help with your application or have any questions, please contact us by phone or E-mail. Return your form to:

NWT Literacy Council P.O. Box 761 Yellowknife, NT X1A 2N6 Phone: 1-867-873-9262 Toll free: 1-866-599-6758

E-mail: daina@nwtliteracy.ca

rachel@nwtliteracy.ca



Here is an **example budget** for a 6 week 1-2-3 Rhyme with Me Program

	Request (funds for <u>new</u> purchases/services)	<b>In Kind</b> (value of <u>donated</u> goods/services)	<b>Total</b> (request + in kind)
Space			
The location of your program should be free or available for a small donation	400.00	400.00	800.00
Salaries and Honoraria			
2 facilitators x \$200.00 each (Your facilitators may be volunteers, or their salaries may be covered by another program)	400.00		400.00
A new program takes extra time to organize. It's important to allow for this cost of time spent planning (hourly or lump sum amount). \$20/hr X 6 hrs (1hr/week) =	120.00		120.00
Materials and Supplies			
Snacks/Refreshments – Healthy or thematic snacks for families	120.00	100.00	\$220.00
Client Transportation - taxis (This may not be necessary if your agency has transportation available, if the participants do not need it or if you do a virtual program).	200.00		200.00
Craft supplies – \$20 per week x 6 weeks	180.00		180.00
<b>Photocopying</b> of rhymes, flyers, poster and pamphlets	180.00	180.00	360.00
Other Costs (please list):			
COVID-19 costs: hand sanitizer, gas for delivering kits, masks, online platform costs, internet for participants etc.	180.00		180.00
Total	\$1780	\$680	\$2460



Please fill in **ONE** of the following budget forms: The one on this page or the one on page 10.

Budget	Request (funds for <u>new</u> purchases/services)	In Kind (value of <u>donated</u> goods or services)	<b>Total</b> (request + in kind)
Space		,	
•			
Salaries and Honoraria			
Materials and Supplies			
Other Costs (please list)			
COVID-19 costs:			
Total			



Budget	Total	In Kind	Request
Space:			
\$ per week x weeks			
Salaries and Honoraria:			
Program planning, preparation and delivery:  Number of facilitators x \$ /hour x weeks			
Supplies and Refreshments:			
Snacks: coffee juice, snacks, cups, etc. \$per week xweeks			
Client Transportation (taxis)  \$ per week x weeks			
Photocopying of program materials \$ per week x weeks			
Prizes \$ per week x weeks			
Materials: purchase of books etc books x participants x \$/ book			
Advertising: flyers, pamphlets, etc sets of pamphlets x \$ / set flyers x \$ /flyer			
Supplies: craft supplies etc.        x\$        x\$        x\$        x\$			
Other Costs (please list)			
COVID-19 costs:			
Total			