

Cook's Ferry Indian Band
ADULT RECREATIONAL ACTIVITY SUPPORT PROGRAM
Funding Policy

Cook's Ferry Indian Band is in a position to assist and encourage adult Band members' participation in healthy recreational activities through a recreational activity support program through the Nlaka'pamux Legacy Trust (2013) Funds.

The Adult Recreational Activity Support Program has an allocation of \$50,000 per fiscal year (Fiscal year being April 1 to March 31).

Funding is available to a maximum of \$500 per individual Registered Band Member 18 years or older, per fiscal year until the Budget is depleted. The goal is to assist as many Band members as possible. Band members may submit applications for funding as per the following criteria.

Applicant Eligibility:

The following criteria must be met to be eligible for funding:

1. Be a registered Cook's Ferry Indian Band member 18 years or older; and
2. Submit an application with supporting documentation; and
3. Provide an invoice for direct payment to a supplier; or
4. Provide a receipt for reimbursement

Eligible Costs:

The following costs are eligible for funding:

1. Registration fees (example: Gym fees, sports leagues, lessons);
2. Equipment for personal use;
3. Accommodations

Ineligible Costs:

Costs not affiliated with registered recreational activities are not eligible.
Costs covered under Cook's Ferry Band or other external sponsorship/funding.

Food Expenses
Fuel Expenses

Selection Criteria:

In the event that there are more applications than available funding, the applications will be selected based on the following priorities:

1. Applicants not previously funded;

**COOK'S FERRY INDIAN BAND
ADULT RECREATIONAL ACTIVITY SUPPORT PROGRAM
FUNDING POLICY**

Funding Application Process

Funding will be allocated up to a maximum of \$500 per eligible applicant until the budget is depleted. Individuals are to fill out the Adult Recreational Activity Support Program Application in full and submit the supporting documentation to the address on the application form. Applicants may apply for any amount up to a maximum \$500 provided an invoice from a recreational organization or facilitator or receipt from the recreational organization or facilitator has been provided. No applications will be prepaid. Direct Payment only upon receipt of invoice to facilitator.

Proof of participation in a recreational activity must be submitted for accommodation reimbursement requests. Receipts for fees and equipment must accompany applications for completeness. Applications will be reviewed for completeness and considered for funding if complete.

An approved application that does not allocate the applicant with the maximum \$500 allowable funding amount does not reserve any remaining amount for the applicant. Should individuals require additional support through this program, they will be required to submit an additional application and understand that funding may not be available. Each application will be considered a separate application amongst the selection criteria. The aggregate total for one band member will not exceed \$500.

Application Submission Due Dates

Applications will be accepted monthly, and due on the 1st of the month, Applications may be submitted for eligible dates (April 1 to March 31) Prior to April 30 of the current Fiscal Year.

Decision/Notification and Fund Dispersal

Applications will be reviewed within 5 business days.

Notification of application decisions and funding dispersal will be within 5 business days of the review.

Obligations of Cook's Ferry Indian Band

All applications, approvals and denials will be kept on file and kept confidential. Applications and Reports will be provided to the Nlaka'pamux Legacy Trust Board of Directors. Adhere to the NLX Adult Recreational Activity Support Program policy. Consider each request fairly and transparently as per the Policy. Keep a record of amounts available to eligible membership.

Grievance Procedure

If applicants are unsatisfied with the decision made on their application, they must submit in writing the reasons why they feel they should be reconsidered for funding to the Program Coordinator within 30 days of notification of the decision. The Program Coordinator will forward the request to the Band Manager who will make a decision and inform the applicant of the results within 10 business days. If the applicant is still unsatisfied, they may send in a grievance form to Chief and Council for review. Chief and Council will make the final Binding Decision.

**COOK'S FERRY INDIAN BAND
ADULT RECREATIONAL ACTIVITY SUPPORT PROGRAM
APPLICATION FORM**

PO Box 130
Spences Bridge, B.C. V0K 2L0
Tel: 250-458-2224 Fax: 250-458-2312
Email: finance@cookserry.ca

1. Date of Application: _____
2. Persona Data
Full Name: _____
10-digit status registry number: _____ Date of Birth: _____
Mailing address: _____

Phone Number: _____ Email: _____

3. Have you applied for Adult Recreational Activity Support funding in the past? Yes No
If yes, what was the date you last received funding? _____

4. Name the type of recreational activity you are applying for? _____

5. Association/Team Affiliation: _____

6. Start Date: _____ End Date: _____

7. What are the total costs you are applying to cover:

Registration Fees: \$_____ Receipt(s) included: Yes No **Direct Payment:** Yes No

Equipment: \$_____ Receipt(s) included: Yes No **Direct Payment:** Yes No

Accommodations: \$_____ Receipt(s) included: Yes No **Direct Payment:** Yes No

8. Have you submitted proof of registration to a recognized recreational activity: Yes No

I, _____, am requesting \$_____ from the Adult Recreational Activity Support Program. I have read, understand, and agree to the policy.

Signature of Applicant: _____ Date: _____

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GRIEVANCE FORM**

PO Box 130
Spences Bridge, B.C. V0K 2L0
Tel: 250-458-2224 Fax: 250-458-2312
Email: finance@cooksferry.ca

1. Date of Grievance: _____
2. Personal Data

Full Name: _____

10 Digit status registry number: _____ Date of Birth: _____

Mailing Address: _____

Phone Number: _____ Email: _____

What are your grounds for appealing the Band Manager's decision?

Signature of Applicant: _____ Date: _____

Office Use Only

C&C receipt of appeal: _____

Date of Hearing: _____

Decision of C&C: _____