**GRANT APPLICATION** 

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## TRADITIONAL CULTURE GRANT

Please ensure to complete the application in full.

	Applicant I	nformation	
First Name:		_ast Name:	
Beneficiary Name (if different fr	om the applicant):		
Street Address:		Apartment Nu	umber:
City:	Province:		Postal Code:
Phone Number:		Email:	
Status Card Number:			
,			
	Traditional Cult	ure Grant Red	quest
	Please provide a des		
	-		<u> </u>
Please expla	ain the expected benefit ar	nd how it foster	s your Traditional Culture:
1 loude expire	an the expected benefit at		o your manifolial outland.



## **GRANT APPLICATION**

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## Review the traditional culture grant guidelines for restricted requests

Please provide (attachments) and explain a breakdown of the associated costs, your contributions if any, and or other funding sources.						
			,			
Applica Applica	nt Eligibility					
Is the Beneficiary a member of Atikameksheng Anishr	nawhek?	Yes	No			
Is a copy of a band registration document provided?						
Are copies of supporting documents such as quotes	invoices, receipts provided?					
Certification and Authorization to Confirm Personal Incertify that the above information and attachments are tapplication online deems this application signed. I am awanformation will be used to assess grant eligibility. I give information from the following organizations to confirm in	rue, correct, and complete. I am are that the information in this permission to the Atikamekshe	application and the ang Trust to access the	ttached			
Atikameksheng Anishnawbek						
Other (Please specify)			_			
Applicant Signature:	Date:					
Witness Signature:	Date:					