



Moose Cree
First Nation

Ontario First Nation Limited Partnership (OFNLP) ALLOCATIONS

Moose Cree First Nation is accepting application submissions for OFNLP Funding.

**Submissions will be accepted between:
8:30 a.m. on November 3rd and 12:00 noon on November 28th, 2014**

As per the Ontario First Nations Limited Partnership Agreement, the purpose of the funds is for capital and/or operating expenditures in respect of:

1. Community Development;
2. Health;
3. Education;
4. Economic Development;
5. Cultural Development.

Applications to this funding are only permitted to the following:

- Moose Cree First Nation;
- Affiliated Organizations;
- A recognized community organization comprised of MCFN membership.

The following documents are required to be included with your application:

- Business Plan;
- Proposed budget;
- Cash flow statement;
- Letters of supports from Chief, Deputy Chief, or designate;
- Contact Information (Name, Address, Phone and/or Email)

Applications/guidelines are available at the office, or on the Moose Cree First Nation website:

www.moosecree.com

All proposals are to be submitted to:

Randy Chase, Director of Finance

Moose Cree First Nation

P.O. Box 190

Moose Factory, ON P0L 1W0

Fax: (705) 658-4734

Email: dof@moosecree.com

Posted: Friday, October 31, 2014



**MOOSE CREE FIRST NATION
APPLICATION FOR ONTARIO FIRST NATION
LIMITED PARTNERSHIP FUNDING**

(Schedule A)

A separate form for each project or activity must be completed.

PROJECT / ACTIVITY TITLE: _____

DEPARTMENT / PROGRAM / ORGANIZATION: _____

CONTACT PERSON: _____

CLASSIFICATION: Minor (less than \$25,000) Major (more than \$25,000)

<p>CRITERIA – Must be in one of the following:</p> <p>_____ Community Development</p> <p>_____ Health</p> <p>_____ Economic Development</p> <p>_____ Education</p> <p>_____ Cultural Development</p>

GOALS/OBJECTIVES: _____

PROJECT STATUS/DESCRIPTION: Briefly outline where the project/activity currently exists

HAS THIS PROJECT/ACTIVITY RECEIVED O.F.N.L.P. FUNDS BEFORE: No Yes

If yes, what was the name of project/activity and what month and year was this funded:

IS THIS PROJECT/ACTIVITY ELIGIBLE FOR THESE FUNDS:

(Based on criteria for O.F.N.L.P. Allocation Guidelines)

No

Yes

TOTAL ESTIMATED PROJECT/ACTIVITY COST:

\$ _____

TOTAL FUNDING REQUEST FROM O.F.N.L.P FUNDS: \$ _____
BUDGET MUST BE INCLUDED WITH APPLICATION FOR ANY CONSIDERATION.

ARE THERE OTHER PROJECT/ACTIVITY FUNDING SOURCES:

No

Yes

If yes is selected above, please identify below, other funding sources and the amount requested that will be approached for funds. _____

ADDITIONAL COMMENTS: _____

Important Note: All applications submitted must include a letter of support from Chief, Deputy Chief or designate. The Ontario First Nations Limited Partnership Allocation Guidelines ensure that funds are not for the sole benefit or gain of an individual person.

The following is for MCFN Use Only:

Date Received: _____

Received By: _____

Acknowledgement Letter (Must attach copy)

The following is for Committee Use Only:

Date Presented For Decision: _____ Comments: _____

Approved Amount: \$ _____

Not Approved

Approval (Comments): _____

Rejection (Comments): _____

Committee Decision Forwarded (Must attach copy)