



Nikkei Seniors
Health Care &
Housing Society

Japanese Canadian Survivors Health & Wellness Fund

Application – Organization

This is a **draft** of the Organization application for the Japanese Canadian Survivors Health & Wellness Fund. You will be asked the following questions on the online application on our website jcwellness.org. The online applications will be available September 1, 2021 with a deadline of October 31, 2021. Ensure you have all the documents for uploading before you begin (Society Certificate(s), Budget, Quotes, Survivor Endorsement)

1. **Organization Name**
2. **Name of Contact Person**
3. **Mailing Address**
4. **City**
5. **Province**
6. **Postal Code**
7. **Phone Number**
8. **Email Address**
9. **Society Number or Incorporation Number (if you do not have one please use the Small Group Application)**
10. **Upload Society Certificate**
11. **Estimate the number of survivors in your organization**

12. Are you applying for more than one organizational grant under this Fund?

No Yes

If yes, what priority is this application? 1 2

13. Is this a joint application with another organization?

No Yes

If yes, complete the contact information of the joint organization(s) you are applying with. These will be items #1-12 as above.

14. Type of Organization

- Health Care
- Cultural
- Community or Social Service
- Religious
- Social
- Recreational
- Other _____

15. Please select all that apply as it pertains to your Project and Organization

- This Project is a newly created seniors' program
- This Project targets frail and/or isolated seniors
- We have at least a five-year history of serving seniors in health and/or wellness
- We have a history of Japanese Canadian community involvement
- We are a Japanese Canadian organization with survivors
- We offer Japanese Canadian related health and/or wellness activities

16. Organization website URL

17. Organization purpose or mission statement

18. Provide a brief history of the organization

**19. Give an overview of what you do including programs and events.
Please include activities that are specifically for seniors.**

20. How many members do you have and how many of these are seniors?

21. Describe the proposed Project overview, need, and importance

- Title
- Detailed description – provide as much detail as possible
- Describe how this Project will directly benefit survivors in terms of health and/or wellness and the number of survivors directly benefiting?
- Describe how survivors will be involved in the proposed Project?
- Upload a budget
- Provide an explanation of expenditures
- Upload quotes to justify the budget
- Explain what provisions could be made if only partial funding was awarded

22. Amount requested

23. Additional Supporting Document - Please upload the following document: Survivor Endorsement

By applying for this Japanese Canadian Survivors Health and Wellness Fund (JCSHWF) grant, I agree that I have read and understand these Terms and Conditions and agree to abide by them.

1. Nikkei Seniors Health Care and Housing Society's collection of any personal data in connection with the grant application will be for the purpose of supporting you in your application, administering the grant process, complying with legal requirements and acting in accordance with legal authorizations. The personal information may be shared with the National Association of Japanese

Canadians' BC Redress Project if it is deemed important by Nikkei Seniors Health Care and Housing Society to convey information to benefit Japanese Canadian survivors. The personal information may also be shared with a service provider or subsequently formed society which provides management and/or administrative services in connection with the JCSHWF grant, grant funds, and related services and programs. Consent to release personal data may be withdrawn at any time.

2. The information contained in this application and the attachments are true, correct, and complete.
3. This application is made on behalf of the organization(s) named above with their full acknowledgement and consent.
4. The grant funds will be used only as specified in the approved grant application.
5. Any changes to your project must be requested to and approved by the JCSHWF Project Office.
6. If you are unable to complete your project, funds must be returned to the JCSHWF Project Office.
7. A Summary Report will be provided to the JCSHWF Project Office within two months of your project's completion.
8. The release of your name and project information, if your application is approved, may occur through the jewellness.org website, social media, and print publications.
9. Acknowledgement of the Japanese Canadian Survivors Health & Wellness Fund's assistance will appear in all public promotions of your project.

Name and position of person making the declaration