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FOR OFFICE USE ONLY

Project #	Date Received

## TRUST SUBMISSION COVER SHEET FOR PROJECTS ABOVE \$2500

PLEASE TYPE OR PRINT CLEARLY.

Are you applying as : <input type="radio"/> An individual Band Member <input type="radio"/> Rainy River First Nations Entity/ Department: _____ <input type="radio"/> A Member Group (List of Group Members Must be Included)		
Applicant/ Primary Contact SURNAME, GIVEN NAME(S)	Telephone Number _____ Cellular Number _____	Fax Number _____
Mailing Address		Town and Province/ State
Postal Code/ Zip Code		Country
Email Address		Website (if applicable)
<input type="radio"/> Status Number _____ <input type="radio"/> Copy attached  <input type="radio"/> Government Issued Identification with Photo (Type: _____) <input type="radio"/> Copy attached  <input type="radio"/> Document with Current Address  * A COPY OF <u>ALL</u> IDENTIFICATION IS REQUIRED.		
<input type="radio"/> Primary Residence On Reserve <input type="radio"/> Primary Residence Off Reserve (Information will be used for statistical information)		

<b>Amount of Funding Requested from Trust:</b> \$ _____  <b>Complete Budget breakdown included within the submission</b> <input type="radio"/> Yes <input type="radio"/> No  If No, please explain why	<b>Total Project Cost</b> (including all additional sources of funding) \$ _____  <b>Personal Contribution</b> (minimum 5% requirement for Individual Members/ Groups) \$ _____	<input type="radio"/> List Other Funding Agencies Applied To: _____ _____  <input type="radio"/> Receiving funding support from additional source(s) in the amount of \$ _____ \$ _____  <input type="radio"/> Additional Information Attached
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**Trust Criteria ~ Section 8.2 (b): Under which section of the Trust Agreement are you applying?**

<input type="radio"/> 8.2 (b) i – Health Care	<input type="radio"/> 8.2 (b) ii – Educational Opportunities	<input type="radio"/> 8.2 (b) iii – Special Needs of Elders
<input type="radio"/> 8.2 (b) iv – Community Development and Improvement	<input type="radio"/> 8.2 (b) v – Language and Cultural Heritage	<input type="radio"/> 8.2 (b) vi – Community Activity
<input type="radio"/> 8.2 (b)vii – Credit Union, Bank and/or Trust Company	<input type="radio"/> 8.2 (b) viii– Housing	<input type="radio"/> 8.2 (b) ix – Business or Commercial Operation
<input type="radio"/> 8.2 (b) x – Treaty Rights		

**Title of the Project**

**Description of the Project** – Briefly explain the project submission

**Support Documentation** – List, briefly explain and attach copies. Support documentation must include, but is not limited to, copies of denial letters for funding from other sources, quotes/invoices (minimum of 2 required for purchases/fees for service), and information relative to project details.

**\* Use of any RRFN facilities/property for a project requires written approval from the RRFN, which must be included in the support documentation.**

All submissions to the Rainy River First Nations Trust must include the information outlined below.  
 Please review and check off each section to ensure that your submission is complete and meets the review requirements of the Trust.  
 Once you have confirmed that all of the required information is included in your submission, please sign and date.

Once a project submission is approved for funding and the Funding Agreement is signed, the project file and all contents, including application and reporting, can be disclosed to Members upon request to view the file. Release of information will be completed in accordance with the Trust policy on Privacy – Member Applicants and Privacy – Beneficiary Applicant.

ONLY THOSE APPLICATIONS THAT CONTAIN ALL OF THE REQUIRED INFORMATION OUTLINED BELOW, WILL BE REVIEWED.  
**ADDITIONAL INFORMATION MAY BE REQUESTED DURING THE REVIEW PROCESS.**

<input type="radio"/> 1. Trust Cover Sheet	<input type="radio"/> 2. Copies of all requested identification	<input type="radio"/> 3. Proposal/ Business Plan that follows the Trust Template
<input type="radio"/> 4. Project Work Plan with deliverables and timelines	<input type="radio"/> 5. Project Budget / Business Plan Financials & Projections	<input type="radio"/> 6. Project Evaluation Plan

I certify that I have read through the Trust Submission cover sheet, and have enclosed all of the required materials necessary for a project submission.

_____	_____	_____
Print Name	Signature	Date