

# **IPRF Application Form Emergency COVID-19 Application**

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**Welcome, we are pleased to hear from you!**

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Please allow us a bit of time to share who we are:

The Indigenous Peoples Resilience Fund (IPRF) is built upon the resiliency of, and guided by Indigenous Peoples to support Indigenous communities through this current public health crisis.

As IPRF sees trends of the pandemic easing but not yet eradicated, we are continuing our Covid relief. Utilizing our approach of 'money as medicine,' IPRF is committed to continuing to support the critical gaps of service for Indigenous peoples from coast to coast to coast.

IPRF is guided by Indigenous Peoples from the East, South, West, and North, who trust and understand ingenuity and diversity, and we respect that you know your communities better than anyone. Our goal is to provide you with a simple application. Should you have any questions before you begin or at any point, we are here to help.

Should you have ANY questions, please contact us via email at [info@iprfund.ca](mailto:info@iprfund.ca), call at 403-797-0116, fax 1-613-280-1553, or [use this link](#) to book a video/phone call. Service is also available in Cree, Algonquin, and French.

**Response for Long-term Resilience:**

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## Resilience Fund Support:

Applicants who are seeking support are asked to reflect back to their **customary way of living off the land, using the resources provided by taking only what you need, ensuring resources are left for those who follow you.** It is this way of thinking that we are asking you to use in your application.

In this period of COVID-19, through this fund, support would be provided to assist as many communities as possible. Support ranges from \$5,000 to \$30,000. More information can be found at <http://www.iprfund.ca>

Area of support would be the following, but not limited to:

- Operating funds to ensure the ongoing program sustainability of Indigenous-led organizations, Indigenous community groups, First Nations, Metis, and Inuit communities providing local support at a community level that have been affected by COVID-19;
- Training and financial support to areas where gaps in funding are needed to strengthen emergency health care efforts (ex: training of new cleaning procedures) and health related transportation services (ex: purchasing PPE for medical drivers) and community safety initiatives;
- Sustainable access to food and strengthened local food systems (ex: purchasing food to distribute or cook and distribute to vulnerable groups, and purchasing gardening needs);
- Training and infrastructure to help communities overcome technological barriers and connectivity challenges (ex: purchasing additional connectivity for community social distance use, connectivity for summer student support or

assisting in training Elders who would not otherwise use Zoom or social media to get connected);

- Innovation in employment, internships and experiential learning, either virtually or through safe, social-distancing programming; 1 of 7 Make sure this form is saved to your computer before you begin to complete the necessary fields. Completing the form in your browser will not save the answers.
- Ensuring access to counselling, mental wellness and health supports where there are gaps in funding available from government programs (ex: provide mental health or cultural classes virtually to those in need);
- Innovative techniques and support for Elders and Healers who provide counselling, traditional medicines and teachings to youth in their communities;
- Request for funding to fulfill a gap where a shortage of funding for a specific program has been received from another foundation or organization

**We recommend reading the Applicant Guide before starting your application.**

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**Application: to support you in this process we do not expect you to write a 10-page document.**

**However, we do ask you to please answer the following questions in the best way for you.**

**In the spirit of our oral traditions a verbal application can be arranged. Please use these questions as a guideline and please book a time to call (see end of document for contact information) if you wish to do a verbal application in English, French, or Cree.**

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**1. Project Description.** Please describe the project you are making an application for as a result of the challenges of COVID-19 and your response and/or how has COVID-19 impacted your community. (Please add in what, if anything, you have done so far and if you have partners.) \*

*700 words maximum*

**2. What type of group are you? \***

**Registered charity / qualified donee**

**Registered nonprofit / non-qualified donee**

**Other**

*("Other" might be a community group, collective etc.) Applicants must have a bank account in their organization's name. Both QD & NQD are accepted.*

**2b. Are you partnering with another group that is a registered charity? \***

**Yes**

**No/Not sure**

*A registered charity (qualified donee) is an organization that can issue official donation receipts for gifts it receives from individuals and corporations.*

**Name of Partner with charitable status**

*If you have one.*

**CRA #**

*Charitable registration number, if you have one.*

**3. Is your group/organization Indigenous-led (meaning are decisions and direction provided by Indigenous peoples at all levels in your group/organization)? Please share how decisions are made. \***

*700 words maximum. IPRF defines Indigenous-led as 51% or more of Indigenous peoples at all levels of an organization.*

**4. How has your community experienced COVID-19 and what challenges has it presented? \***

**4b. If yes, is there more information you would like to share?**

**5. Would these challenges be an urgent social-economical, mental, or medical need? \***

Yes

No

**5b. If not, is this an adjustment of service impacted by Covid to your communities? \***

Yes

No

**6. Please share more information on your project to provide a clear and simple understanding of how your project goals will care for those you serve. \***

*700 words maximum. Example: how many people does this care for*

## **7. Project Timeline**

**Please provide the start date. \***

*yyyy-MM-dd*

**Please provide the end date. (Project must be complete within 1 year of application). \***

*yyyy-MM-dd*

***If helpful, please share more about your project timeline:***

*This is not mandatory.*

## **8. Budget**

**When filling this out please think about how the budget relates to the work you will be doing, for example: what is the duration of the initiative, how are you going to use the funds, what do you need to purchase, and are you paying people (example: salaries or honorariums).**

Please refer to the Applicant Guide for information on eligible expenses.

### Budget Request Template

| <b>Amount Requested.</b> | <b>Need.</b>                      | <b>Description of the expense</b>  | <b>Duration</b>  |
|--------------------------|-----------------------------------|--|--|
| <b>Ex: \$1,000</b>       | <b><i>Ex. Salaries, seeds</i></b> | <b><i>Ex. Salaries for 2 people; non-GMO seeds for spring planting</i></b> | <b><i>Ex. 2 weeks, mid to end of June, ongoing</i></b> |
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**Total Amount Requested:**

*From Budget Template Subform*

**9. Other support.** *Is this project already being supported? If yes, please share a bit about those details. Examples of existing support might be: your group allocation internal resources towards it, monetary or in-kind gifts from a partner, other grants, or other supports. You may choose to answer this question in a narrative format (Option 1) or laid out as a budget (Option 2).*

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**Tell us about the other support for your project in a paragraph.**

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**10. Contact Information**

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**Organization Contact Information**

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**Name of Group/Organization \***

**Primary Contact Name \***

**Title**

**First**

**Last**

*This is the first individual IPRF will contact if we have any questions.*

**Primary Contact Role \***

**Primary Contact Email \***

**Organization Phone \***

**###-###-####**

**Organization Fax**

**Organization Street Address \***

*Enter a value for this field.*

**Organization City/Town/Hamlet \***

**Organization Province/Territory \***

-Select- AB BC MB NB NL NS NT NU ON PE QC SK YT

**Organization Postal Code**

**Does your organization have a website?**

*If yes, please add the URL here.*

### **Additional Contact Information**

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**Do you want to share additional contact information for the primary contact? \***

Yes

No

*This can be helpful if the person has a direct number or cell phone, or if the person is working from home.*

**Please provide a Secondary Contact, in case we cannot reach the Primary Contact. \***

*First*

*Last*

*Secondary Contact Role \**

*Secondary Contact Email*

*Secondary Contact Phone*

*###-###-####*

***Secondary Contact Extension***

***If applicable.***

**Is there any other contact information you would like to share with us?**

***(Ex. Additional names and emails, instructions on who we should copy in our communications with you, etc).***

**How did you learn about IPRF? \***

**Friend**

**Work colleague**

**Social Media**

**"Moccasin Telegraph"**

**Other**

*(This information helps us get the word out to communities.) Check all that apply.*

**Has anyone in your organization/group applied to IPRF before? \***

**Yes**

**No**

**I don't know**

**11. Project Location Information.** Where will your project take place?

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**Territory \***

**Additional project location info:**

*(e.g. City/Town, Province/Territory, Postal Code)*

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**12. Confirmation and Permission**

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**Would you be willing for us to share this application with our partners and potential funders? If yes, we will let you know who it was shared with.**

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Yes

No

**In the spirit of sharing how communities are responding to COVID-19 could we share your story? If yes, we will let you know who it was shared with.\***

Yes

No

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## Reporting Requirements

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Should your application be accepted the IPRF will ask you to report on the use of the funds provided. Honouring our oral traditions, we invite you to answer the questions through video/phone call or share a video (max 3-5 min). If you have questions, or to book time, please call 403-797-0116, email [info@iprfund.ca](mailto:info@iprfund.ca) or use [this link](#) to book time.

Or if you prefer writing, we will be looking for answers to these questions (maximum 400 words per question.)

1. How did you use the support that was provided?
2. Were you able to implement your response within budget you submitted for the application? If you deviated from the budget, how and why were those deviations made?
3. Did you have any difficulty in implementing your response to COVID-19?
4. How has the support provided made a difference to your group/community?
5. Please share your successes, challenges and learnings.
6. If you had a partner or another funder, how did you use their support in your response?
7. Please provide us with any feedback on how we can improve. (Example: the application or reporting process.)

Please note that after submitting you will be able to download a PDF copy.

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