

***NEW: Application deadlines are June 30, 2026 (1st intake) and September 30, 2026 (2nd intake).**

Please **download** and **save** this document to your computer before filling out & sending.

If you encounter any barriers or need accessibility support during the application process, please contact the program representative for assistance.

Section 1 – Applicant Information

Name of Applying Organization (as it appears in the *Registry of Joint Stocks*, if applicable):

NS Registry of Joint Stocks or Canadian Charity #: _____

Mailing Address of Organization

Street Number _____ Street Name _____

P.O. Box _____ City/Town _____

County _____ Postal Code _____

Organization E-mail _____

Organization URL: _____

Civic Address of Organization, (if different from mailing address above)

Street Number _____ Street Name _____

P.O. Box _____ City/Town _____

County _____ Postal Code _____

Contact Information of Project Lead

Name of Project Lead _____

Telephone (primary) _____ Telephone (alt.) _____

E-mail Address _____

Type of Organization

- Non-profit community organization
- Municipality, Village or Mi'kmaq Band Council
- Post-secondary Education Institution and Schools (through their Regional Central of Education or Conseil Scolaire Acadien Provincial)

Equity, Diversity, Inclusion, and Accessibility (EDIA)

Some useful resources for this section are

- Nova Scotia Access by Design 2030: novascotia.ca/accessibility
- Nova Scotia’s Equity and Anti-Racism Strategy: [equity-and-anti-racism-strategy.pdf](#)

Communities, Culture, Tourism and Heritage (CCTH) is committed to ensuring our programs and services are equitable, diverse, inclusive and accessible. Understanding the demographics of our clients and people we serve will help us determine whether our programs, funding allocations, and processes are inclusive of Nova Scotia’s diverse communities.

A) Does your organization have a specific mandate or primary focus to serve any of the following underrepresented and/or underserved communities? Select all that apply:

<input type="checkbox"/> 2SLGBTQIA+	<input type="checkbox"/> Mi’kmaq
<input type="checkbox"/> Acadian / Francophone	<input type="checkbox"/> Persons of African Descent
<input type="checkbox"/> African Nova Scotian	<input type="checkbox"/> Persons Living with Disabilities
<input type="checkbox"/> Gaelic/Gaels	<input type="checkbox"/> Racialized Groups / Communities
<input type="checkbox"/> Indigenous	<input type="checkbox"/> None of the above
<input type="checkbox"/> Immigrants / Newcomers / Refugees	<input type="checkbox"/> If not identified above, please specify: _____

If you answered “None of the above,” please also fill out Part B.

B) While your organization serves the public, does your organization deliver any programs, services, or outreach specifically intended to serve the following underrepresented and/ or underserved communities? Select all that apply:

<input type="checkbox"/> 2SLGBTQIA+	<input type="checkbox"/> Mi’kmaq
<input type="checkbox"/> Acadian / Francophone	<input type="checkbox"/> Persons of African Descent
<input type="checkbox"/> African Nova Scotian	<input type="checkbox"/> Persons Living with Disabilities
<input type="checkbox"/> Gaelic/Gaels	<input type="checkbox"/> Racialized Groups / Communities
<input type="checkbox"/> Indigenous	<input type="checkbox"/> None of the above
<input type="checkbox"/> Immigrants / Newcomers / Refugees	<input type="checkbox"/> If not identified above, please specify: _____

The information you provide will help us learn if our programs and processes serve underrepresented and/or underserved communities and are inclusive of Nova Scotia’s diverse population. Information will be handled in accordance with applicable privacy and confidentiality regulations.

Section 2 – Project Information

Project Title: _____

Project Start Date: _____ End Date: _____

1. Type of Project (select one)

- Planning Design Research Audit

2. Project Description

A. Provide brief description for the proposed project (1-2 sentences)

B. How will the project sustain, improve or expand participation in recreation, sport and physical activity in your community?

C. Describe the need or urgency for the project. If applicable, in what ways are climate change, and/or resiliency to extreme weather events, informing the need for this project and/or your decisions and design?

D. Copy of Request for Proposal, Statement of Work or Terms of Reference is attached.

Yes No

Section 3 – Project Budget

1. Funding Background

A. Has this project previously received **other government funding**, or will it receive other government funding? Yes _____ No _____

If Yes, from which government program or department? Please list all.

2. Project Budget: (Please see grant program guidelines for eligible/ineligible costs.)

Project Expenditures

In-kind contributions, if applicable, are entered in both project expenses and project funding.

Type of Expenditure	Breakdown of Costs, Additional Information	Amount
Proposal Estimate		
Other		
Other		
Other		
Other		
Total Expenditures		

Project Revenues

In-kind contributions, if applicable are entered in both project expenses and project revenues.

Funding Source	Description	Amount	Funding Status (required)	
			Pending	Confirmed
Applicant Cash Contribution			<input type="checkbox"/>	<input type="checkbox"/>
Federal Government Funds			<input type="checkbox"/>	<input type="checkbox"/>
Municipal Government Funds			<input type="checkbox"/>	<input type="checkbox"/>
Other Provincial Government Funds			<input type="checkbox"/>	<input type="checkbox"/>
Other			<input type="checkbox"/>	<input type="checkbox"/>

If applicable, note below In-Kind/Volunteer contributions.

Please provide details on in-kind contribution, i.e. # of hrs x hourly rate, or discounts on materials/equipment related to the above costs. Attach a separate document as needed.

In-kind Labour			<input type="checkbox"/>	<input type="checkbox"/>
In-Kind Materials			<input type="checkbox"/>	<input type="checkbox"/>
In-Kind Equipment			<input type="checkbox"/>	<input type="checkbox"/>
In-Kind Other			<input type="checkbox"/>	<input type="checkbox"/>

Total Project Funding

The amount requested from CCTH must not exceed 50% of the total project cost, and must not be more than \$10,000.00.

Amount requested from Planning Assistance Program: _____

Section 4 – Consent and Declaration

Consent (please check boxes below to consent)

- I consent to the sharing of my information with other government departments, organizations or contractors that the Department of Communities, Culture, Tourism and Heritage (including African Nova Scotian, Acadian and Gaelic Affairs) or Arts Nova Scotia has a data sharing agreement with.
- I consent to the Department of Communities, Culture, Tourism and Heritage (including African Nova Scotian, Acadian and Gaelic Affairs) or Arts Nova Scotia adding my name, mailing address and e-mail to a distribution list to receive updates on programs, services, news and events.

Declaration

As a representative of an organization:

- I have carefully read the application guidelines and eligibility criteria for this program, and
 - I confirm that the organization I represent meets the eligibility criteria to the best of my understanding.
 - I am aware that all overdue final reports, where applicable, for previously funded applications must be submitted and approved before any additional requests or applications for funding can be considered.
 - I will act as the representative of the organization and will keep all participants informed of the application content and any funding decision.
- I accept all the declaration statements above that are applicable to me as a representative of an organization. I understand that not accepting these statements as true may affect eligibility for this funding application.*

1st Signature of Signing Authority _____ (Date) _____

2nd Signature of Signing Authority _____ (Date) _____

CCTH Office Use Only		
Total Project Cost: _____ Grant Amount Requested: _____ \$ Recommending: _____		
NOTES:		
Regional Manager Printed Name:	Signature:	Date

Section 5 – Contact and Submission

Please save your application on a personal device before starting to complete and before submitting.

Cape Breton Region (Cape Breton Island)

Larry Maxwell, *Regional Manager*

Email: CapeBretonRegion@novascotia.ca

Phone: 902-578-4813

Courier/Mail: 850 Grand Lake Road, Suite 15, Sydney NS B1P 5T9

Central Region (Halifax Regional Municipality, HRM)

Andrea Redmond, *Regional Manager*

Email: Centralregion@novascotia.ca

Phone: 902-578-4813

Courier: Homburg Building, 3rd Floor, 1741 Brunswick St., Halifax

Mail: PO Box 456, Halifax, NS B3J 2R5

Fundy Region (Cumberland, Colchester Counties, Municipality of East Hants)

Courtney Nicholson-Patriquin, *Regional Manager*

Email: FundyRegion@novascotia.ca

Phone: 902-338-0659

Courier/Mail: 80 Walker Street, Suite 1, Truro, NS B2N 4A7

Highland Region (Guysborough, Antigonish and Pictou Counties)

Rae Gunn, *Regional Manager*

Email: HighlandRegion@novascotia.ca

Phone: 902-338-0659

Courier/Mail: 149 Church Street, Suite 4, Antigonish, NS B2G 2E2

South Shore Region (Yarmouth, Shelburne, Queens, Lunenburg Counties)

Anna Haanstra, *Regional Manager*

Email: SouthShoreRegion@novascotia.ca

Phone: 902-698-9407

Courier/Mail: 312 Green Street, Lunenburg, NS B0J 2C0

Valley Region (Annapolis, Kings, Digby Counties, Municipalities of West Hants, Clare)

Anna Sherwood, *Regional Manager*

Email: ValleyRegion@novascotia.ca

Phone: 902-698-9407

Courier/Mail: 10 Webster St., Suite 200, Kentville, NS B4N 1H7