

# GWA'SALA-NAKWAXDA'XW TRUST GRANT PROPOSAL

## 1. GENERAL INFORMATION

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**Proposal Name:** YOUTH SPORTS AND RECREATION 2024

**Name of Trustee Applicant:**

**Associated Band Department:** GN Health Services

**Associated Band Department Contact Information:** 250-949-8131, Director

**Amount Requested for 2025:** \$102,520.00

**Estimated number of Band members to benefit:** 506+ YOUTH <ON AND OFF> AND THEIR FAMILIES

## 2. PROJECT DESCRIPTION

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**Project Summary:** Briefly describe the project (3 or 4 sentences), including a high-level description of what will be done.

PURPOSE: FUND YOUTH SPORTS AND RECREATION ACTIVITIES

COORDINATE FUNDING FOR REGISTRATION FEES FOR YOUTH UP TO 18YRS OF AGE, SPORTS ACTIVITIES SUCH AS SOCCOR, ICE HOCKEY, SWIMMING, GYMNASTICS, DANCE, KARATE, FITNESS PROGRAMS, Or New approved programs\*

COORDINATE ANNUAL FAMILY COMMUNITY EVENTS SUCH AS SPRING CLEAN UP, CARNIVAL. SUMMER DAY CAMP, YOUTH ACTIVITIES & CONFERENCES. ANNUAL SPORTS DAY/SUMMER FUNDAY. Holiday/community events\*

IF REQUIRED SPORTS EQUIPMENT

# PROJECT BACKGROUND

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**Project Background: Outline the context for the project. Provide necessary background to understand why the project is being undertaken.**

Our Mission is that-we believe in working together with families and community to promote a healthy and safe environment. We do this by providing youth activities, family events, Social community functions to empower families to make positive change

Network, communicate, develop and work closely with youth, families and community to promote programs.

# PROJECT PURPOSE

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**Project Purpose: Explain the purpose of the project by describing what this project is aiming to achieve. What is its vision? What need or opportunity will it address?**

- *Create and promote positive, healthy activities & lifestyles for the youth in our community*
- *in conjunction to supporting youth activities, we will continue to promote parents to volunteer and be part of the activities*
- *our guiding philosophies are to supplement trust committee grant money wthth fund raising throughout the year to support ongoing sports activities*
- *build capacity and skills within our community*
- *foster community involvement and ownersidp*
- *provide incentives to youth to attend school*
- *network with other funding sources to ensure the funding connections are in place*

### 3. Budget

**Project Costs: Identify applicable cost categories such as: wages, consulting costs, materials, project management, equipment costs, etc.**

| Proposal cost category  | Total Cost          |
|---|---------------------|
| Registration: for all youth to attend sports activities of their choice throughout the year | \$50,000.00         |
| Community Events for children, youth & families   | \$10,000.00         |
| Various annual Youth incentives (swimming, skating etc.)                                    | \$10,000.00         |
| Carnival  | \$10,000.00         |
| YSR Van maintenance & Insurance   | \$3,200.00          |
| Youth Trips   | \$10,000.00         |
| <b>Total</b>  | <b>\$93,200.00</b>  |
| Contingency (10%)   | \$9,320.00          |
| <b>Grand total</b>  | <b>\$102,520.00</b> |

**Funding Timeline: In what month(s) will you require the Trust funds requested in your proposal.**

2025/2026 Year or the year timeline of the trust calendar

### 4. PROJECT MANAGEMENT

**Project Management Team: Identify the individuals who will be responsible for managing the project and provide their contact information.**

Sub-committee, Youth Manager, YSR coordinator -conduct meetings. plan and bring community/families together to take ownership of projects, YSR worker will coordinate events and youth programs

They will seek other funding sources, network with Band Administration to apply for project funding and the Trust Committee dollars will "Top Up" the other funding, Health Funds Contribution

# REPORTING STRUCTURE

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**Identify the reporting structure for the proposal**

Monthly newsletter reports and an annual report at AGM, quarterly reports to the trust committee.

# 5. OTHER

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**Are there any potential risks that might threaten the successful completion of the project? Indicate how these risks will be mitigated.**

N /A

**Is there any other information relating to the proposal that the Trust Committee should be aware of?**

Joint funding from First Nation Health Authority has been provided after years of the nation solely funding this program.

**Where the proposal requires the purchase of supplies, equipment or services, indicate how best values for money will be ensured. Indicate where the Applicant has a procurement policy in place.**

All Current Nation Financial Policies will be followed.

## 6. TRUSTEE APPLICANT

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**How have project costs been reviewed /verified for accuracy, completeness and reasonableness? Explain.**

This is an ongoing program with years of budgets to rely on for information to insure Accuracy.

**In addition to the funding sources identified above, has the Applicant approached/applied to any other funding programs? If yes, indicate organization and the status of those applications. If no, please explain.**

Will work with GN Health Services department.