

EMERGENCY MANAGEMENT NON-STRUCTURAL MITIGATION AND PREPAREDNESS PROGRAM APPLICATION

PAW Number/Fiscal Year:
6978382 (2019-2020)

Purpose:

First Nations or Organizations seeking funding under the Emergency Management Assistance Program are required to provide a project proposal or work plan that indicates all activities to be undertaken and expected results and outlines the proposed budget for emergency management activities.

Reporting Period:

For the coming fiscal year ending March 31st

Due Date:

Due date will be communicated through call letter.

Field Definitions:

Field	Definition
Recipient Information	
Recipient Name (First Nation or Organization)	The name of the Recipient (First Nation or Organization) applying for the grant and/or contribution(s) as per the legal name that will appear on the funding agreement.
Recipient Number	The attribution number for the band as shown in the Department's Financial Management Manual or Funding Agreement (ISC internal use).
Emergency Program Coordinator/Project Lead	
Given Name Family Name Telephone Number Facsimile Number Email Address	The given name, family name, telephone number, facsimile number and email address (if applicable) of the person who can be contacted for further information about the application.
Project Information	
Project Title	Provide the title of your project.
Region	From the drop-down list, select the ISC Region to which this report is being submitted.
Project Type	Select the funding stream for which the proposed project type applies.
Project Description	Briefly describe your proposed preparedness/non-structural mitigation project in a maximum of 500 words.

Field	Definition
Project Outcomes	Describe how will this project increase your community(ies) emergency preparedness against natural hazards or to mitigate identified risks as part of disaster risk reduction efforts (maximum 250 words)? NOTE: Outcomes will be assessed on whether or not they are SMART - Specific, Measurable, Achievable, Relevant, and Timely.
Project Deliverables	Describe what skills, abilities and knowledges will enhance the community's resiliency (maximum 250 words)?
Funding Requested	
Items	Name or briefly describe the funding costs being requested (i.e. training, professional fees, travel, etc.). Please refer to the program guidelines for eligibility.
Amount (\$)	List the funding amount requested for each item.
Total Requested from ISC	Calculated automatically
Other Sources of Funding	
Funding provided by your First Nation	List all other sources of funding provided by your First Nation community.
Funding provided by Regional District/Local Government/Other	List all other sources of funding provided by other entities such as regional district/local government
Amount (\$)	List the funding amounts for other sources of funding
Total funding from other sources	Calculated automatically
Optional - Additional Information	
Has your community experienced emergency disasters in the past? If so what type of emergency(ies) and when?	List all emergency disasters experienced by your community in the past.
Do you agree to have ISC's Emergency Management Assistance Program contact you to discuss highlighting your emergency preparedness or non-structural mitigation project on ISC's website?	ISC's Emergency Management Assistance Program will be highlighting projects on its website, please indicate if you agree for ISC to contact you regarding potentially highlighting your project.
Declaration	
Given Name Family Name Title Date (YYYYMMDD)	The given name, family name and position title of the person who acknowledged the accuracy of the information, and the date on which it was completed. Dates are in the format of Year-Month-Day.