

## Indigenous and Stakeholder Capacity Fund Contribution Funding Application Form

Please complete all sections of this form to apply for contribution funding under the Canadian Nuclear Safety Commission's (CNSC) Indigenous and Stakeholder Capacity Fund (ISCF).

FUNDING OPPORTUNITY				
The CNS	Сļ	provides contribution funding through the Indigenous and Stakeholder Capacity Fund (ISCF) via three different funding streams:		
Stream <sup>2</sup>	: lı	ndigenous Capacity Support		
Stream 2	2: F	Regulatory Policy Dialogue		
Stream 3	3: E	Engagement and Collaboration Support		
Please se	ele	ct the funding stream that you are applying for in this application.		
Stre	an	n 1: Indigenous Capacity Support Stream 2: Regulatory Policy Dialogue Stream 3: Engagement and Collaboration Support		
		omit your completed funding application forms to the ISCF administrator at <u>iscf-fscpia@cnsc-ccsn.gc.ca</u> by the date specified in the funding opportunity te funding applications will not be considered by the CNSC.		
Please o	on	nplete one application form for every funding opportunity that you wish to apply for.		
Please r	ot	e:		
1		Funding applicants must demonstrate that their proposals are relevant to the funding opportunity description and meet recipient, activity, and expenditure (cost) eligibility requirements.		
2		In addition to meeting eligibility requirements, the CNSC will consider capacity-building priorities, needs and interests identified by the CNSC through direct engagement and communication with Indigenous Nations and communities and key public stakeholders to assess funding applications. More information on the assessment criteria can be found in the Application Guide on the CNSC's website.		
3		Completing this funding application form does not guarantee that funds will be granted or that the entire amount requested will be granted.		
4	4. Incomplete or late funding applications for the ISCF will not be considered by the CNSC. You may be contacted by the CNSC if additional information is required to assess your application.			
5		All funding applicants must agree with the general terms and conditions of the CNSC's ISCF before submitting their applications for funding.		
6	6. A contribution agreement will be sent to each successful funding applicant. It will outline the required deliverable(s) and the maximum amount of funding approved for the activity. The successful funding applicant must sign and return the contribution agreement to the CNSC. In order to receive the approved funding, the recipient agrees to fulfill all the conditions of the contribution agreement.			
7		The CNSC is authorized to collect personal information to administer the ISCF, per paragraphs 21(1)(a) and (b) of the Nuclear Safety Control Act. The personal information collected on this form is required to communicate with funding applicants and to help determine their eligibility for the ISCF. The collection of personal information on this form is mandatory and failure to provide this information will result in the rejection of the funding application. For reasons of accountability, the name, contribution amount and the type of activity funded as a result of successful funding applications may be disclosed publicly by the CNSC. All personal information received under the ISCF will be protected and managed according to the Privacy Act. Personal information collected for this process is described in the Personal Information Bank CNSC PPU 030. If your application is successful, your name, contact information and financial institution information will be shared with Public Services and Procurement Canada (Receiver General Payments PWGSC PCU 712) to facilitate payment. For more information, please see the CNSC Indigenous and Stakeholder Capacity Fund Application Guide.		

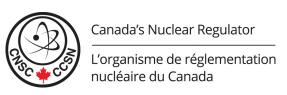




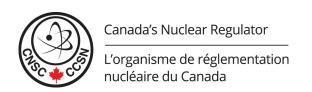
1 FUNDING APPLICANT					
Please refer to the Indigenous and Stakeholder Capacity Fund Application Guide for help to complete this funding application form.  NOTE: Funding requests from unincorporated associations or groups of individuals can only be accepted when one individual applies on behalf of the Nation, community,					
organization or association.					
Name of individual, Indigenous Nation or community, or	ganization or association:				
Mailing address:					
City/Town:	Province:	Postal code:			
Cell phone number:	Home phone number:	Business phone number:			
Email:					
Please provide a brief description of the Nation, commun	nity, organization or association applying for funding. [200	words maximum]:			
<b>NOTE:</b> The CNSC may request supporting documentation endorsing the funding applicant as the representative of the Nation, community, organization or association to be submitted with the completed funding application form, prior to the application deadline.					
2 RECIPIENT ELIGIBILITY					
Select all the boxes that apply and explain how the ap	plicant meets the selected eligibility criteria.				
In order to be eligible for funding through the ISCF, the ap	pplicant must be one of the following:				
Indigenous person, Nation, community, or organization with a direct interest in nuclear projects, facilities and activities in Canada					
Non-governmental organization with a direct interest in nuclear projects, facilities and ctivities in Canada					
Member of the public with a direct interest in nuclear projects, facilities and activities in Canada					
Other organization with a direct interest in nuclear projects, facilities and activities in Canada					



Please explain how th	ne funding applicant meets the eligibility criteria selected above. [150 words maximum]:
Please explain the fun maximum]:	nding applicant's interest in nuclear projects, facilities, and activities in Canada, including any relevant opinions, concerns, or issues. [150 words
2 DICCLO	CLIPE OF CONFLICT OF INTEREST
3 DISCLO	SURE OF CONFLICT OF INTEREST
	licant have any involvement, personal, family or business relationship with the CNSC, CNSC staff or any other government department or agency also r? If yes, please provide details including name, relationship, government position and department.
Yes	○No
Please explain:	
Is the funding applicar	nt a former public servant who is currently required to abide by the Directive on Conflict of Interest and Values and Ethics Code for the Public Sector?
Yes	○No
Please explain:	
4 OTHER I	FUNDING SOURCES
	cant applied for or received funds from any other source(s) to participate in the proposed activity? The funding applicant must disclose all sources of
funding for the propos	sed activity.
Yes	○No
	the source(s) and the amount of funding that was received or will be received by the ISCF funding applicant, and the specific activities for which this
	e used. [200 words maximum]:



Source(s) of funding (name of funding provider):			
Activities:	Amount(s) of funding (applied for or received):		
Date of completion of activities related to this funding: YYYY/MM/DD	Date of receipt of funds: YYYY/MM/DD		
5 FUNDING APPLICANT'S PROPOSAL			
Please answer the following questions to help explain the funding applicant's proposa	l in relation to the current funding oportunity.		
<b>A.</b> What is the funding applicant's proposal in relation to the current ISCF funding opposite intended results, and the specific activities that will be undertaken to achieve the gather, and collect information (if applicable) and the timelines to complete the activities that will be undertaken to achieve the gather.	objectives. Please include details on how the funding applicant intends to obtain,		
B. How does your activity proposal relate to the CNSC's mandate and the goals and ol	bjectives of the ISCF? [1000 words maximum]:		



## 6 EXPENSES

Please explain how funding will be spent, if awarded. Fill in one or more of the applicable cost charts below.

\*Please attach all relevant resumes, curricula vitae and work experience documentation related to the professionals listed in the application.

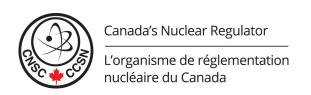
\*\*All personal information received under the Indigenous and Stakeholder Capacity Fund will be protected and managed according to the *Privacy Act*. Personal information collected for this process is described in the Indigenous and Stakeholder Capacity Fund Personal Information Bank, CNSC PPU 030. For more information, please see the Indigenous and Stakeholder Capacity Fund Application Guide.

NOTE: Funding will only be provided to reimburse expenditures that are required to support the activity objectives.

A PROFESSIONAL FEES				
Professional fees relate to the costs of hiring an internal r or assistance relevant to the objectives of the activity.	esource (i.e., staff salaries) or	a professional (i.e., bio	ologist, translator, environme	ntal engineer, etc.) for expert advice
1. Name of professional:		Credentials:		
Company name:		Telephone number	:	
Email:				
Cost: Hourly rate	x	number of hours		=
Justify why these costs are necessary to achieve activity	objectives [maximum 100 wo	ords]		
2. Name of professional:		Credentials:		
Company name:		Telephone number	:	
Email:				
Cost: Hourly rate	x	Number of hours	-	=
Justify why these costs are necessary to achieve activity objectives [maximum 100 words]				
Total funding sought for professional fees:				

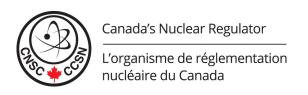






B TRAVEL	
Travel costs may include transportation, accommodation, meals and incidentals. Paym	ent for travel adheres to the National Joint Council Travel Directive.
NOTE: If there are more than two travellers, fill out a second electronic version of the a	
Note: If there are more than two travellers, fill out a second electronic version of the a	ppication of plant out another copy of section b to complete.
1. Name of traveller:	Destinations (departure/arrival):
1. Name of traveller.	Destinations (departure/anival).
Type of travel expenditure (identify and justify each expenditure):	Amount:
Indicate the role of traveller in the activity and justify why these costs are necessary to	achieve activity objectives. [maximum 75 words]:
2. Name of traveller:	Destinations (departure/arrival):
The of the old area of the of the office of the office of the old area of the old area.	A
Type of travel expenditure (identify and justify each expenditure):	Amount:
Indicate the role of traveller in the activity and justify why these costs are necessary to	achieve activity objectives. [maximum 75 words]:
Total fr	unding sought for travel and incidentals:
C OTHER COSTS (if applicable)	
These are for other eligible expenditures (costs) that are directly linked to the applican	t's ability to deliver on the proposed activity – as detailed in this funding application.
Other costs can include: administrative costs, room rentals, hospitality, office supplies,	
professional fees or travel.	
1. Activity or expenditure:	Cost:
Justify why these costs are necessary to achieve activity objectives. [maximum 75 wor	ds]:
2. Activity or expenditure:	Cost:
2. Activity of experimente.	Cost.
Justify why these costs are necessary to achieve activity objectives. [maximum 75 wor	ds]:





3. Activity or expenditure:		Cost:		
Justify why these costs are necessary to achieve activity objectives. [maximum 75 words	5]:			
4. Activity or expenditure:		Cost:		
Justify why these costs are necessary to achieve activity objectives. [maximum 75 words	5]:			
	Total funding sought for other costs:			
TOTAL ISCF FUNDING REQUEST	T FROM ALL APPLICABLE CATEGORIES:			
7 RESULTS				
All funding applicants will be notified of the outcome of their funding request via email.				
Please indicate your official language of choice:				
©English ©French				
A contribution agreement will be sent to successful funding applicants for signature. The	a Contribution Agreement can be found of	a tha CNSC/s ISSE wakeita		
A contribution agreement will be sent to successful funding applicants for signature. The	e Contribution Agreement can be found of	THE CNSC SISCE WEDSILE.		
8 DECLARATIONS				
In order for an application to be eligible for funding, the following declarations must be	made by the official representative(s) of th	e applicant.		
I, On behalf of	certify and agree	to the following:		
	ii 5 ii di CNCC ( ( li li li	AL CARCULAGE		
<ol> <li>I declare that I am duly authorized to submit this Contribution Funding Applic</li> <li>I certify that the information provided in this Contribution Funding Applicatio</li> </ol>	<u>-</u>			
	3. I acknowledge that I have read, understood and agree with all the terms and conditions in the Contribution Funding Agreement template and the Application			
<ol> <li>I declare that I have obtained the required permission from third parties whose personal information is included in this Contribution Funding Application Form and supporting documentation, to share their personal information with the CNSC for the purposes of applying to this funding opportunity and receiving funding</li> </ol>				
through the ISCF.  5. I agree that no funding will be payable unless I sign and agree with all the terms and conditions in the CNSC's contribution agreement, which includes the Application Guide.				
	antia ma a la avva			
By clicking on the "I agree" button below, the applicant certifies and agrees to the declar	ations above.			
() I agree () I do not agree				
Signature of funding applicant:	Date :YYYY-MM-DD			
Thank you for completing the Contribution Funding Application Form for the CNSC's ISC	CF. Please email your completed form to iso	:f-fscpia@cnsc-ccsn.gc.ca.		