

## The Catholic Women's League of Canada

### Application for Subsidy from the National Development Fund

PLEASE APPLY FOR SUBSIDY AND COMPLETE THIS FORM TWO MONTHS PRIOR TO HOSTING YOUR WORKSHOP

Name of council applying for subsidy \_\_\_\_\_

Total amount of subsidy requested: \$ \_\_\_\_\_ (provide complete detailed expenditures on reverse)

Signature of applicant: \_\_\_\_\_ Date: \_\_\_\_\_

Address: \_\_\_\_\_

Phone No.: \_\_\_\_\_ Facsimile No.: \_\_\_\_\_ E-mail: \_\_\_\_\_

Workshop title: \_\_\_\_\_

Place \_\_\_\_\_ Date \_\_\_\_\_ Number attending \_\_\_\_\_ Duration \_\_\_\_\_

\_\_\_\_\_ Date \_\_\_\_\_ Number attending \_\_\_\_\_ Duration \_\_\_\_\_

\_\_\_\_\_ Date \_\_\_\_\_ Number attending \_\_\_\_\_ Duration \_\_\_\_\_

Diocese \_\_\_\_\_ Province \_\_\_\_\_

Name(s) of facilitator(s) \_\_\_\_\_

Parish councils participating \_\_\_\_\_

**The National Development Fund does not cover expenses for:**

- decorations, such as banners, etc.
- honoraria for CWL resource persons
- meals, accommodations, refreshments for participants
- paid advertising

Attach agenda, including a list of resource materials. Following review and approval by the diocesan president, the application form and a copy of the agenda listing the resource material must be forwarded directly to the provincial president for review and approval, who will forward the application form to the national chairperson of organization for review and approval. Notices of approval will be sent by national office to the applicant, with a copy to the treasurer for her records.

The cheque will be sent to the council treasurer.

Name of council treasurer \_\_\_\_\_

Address \_\_\_\_\_

Supplies requested should be forwarded to:

Name \_\_\_\_\_

Address \_\_\_\_\_

**THIS SECTION MUST BE COMPLETED.**

**Application for Subsidy from the National Development Fund**  
**BUDGETED DETAILED EXPENDITURES**  
*(Refer to National Development Fund Guidelines)*

Item	Quantity & Description		Projected Cost
CWL Supplies		\$	
		\$	
		\$	
		\$	
<b><u>Transportation for members (provide details on reverse)</u></b>	<i>Total kilometers @ \$0.43</i>	\$	
<b>Meeting room</b>		\$	
<b>Printing</b>		\$	
<b>Postage</b>		\$	
<b>Telephone calls</b>		\$	
<b>Expenses for facilitator</b>	<b>Meals</b> \$ <b>Travel</b> \$ <b>Accommodations</b> \$ _____ \$ <u>                  </u>	\$	
<b>Other expenses (provide details)</b>		\$	
<b>TOTAL AMOUNT OF SUBSIDY REQUESTED</b>		<b>\$</b>	

\_\_\_\_\_

Diocesan President

\_\_\_\_\_

Date

\_\_\_\_\_

Provincial President

\_\_\_\_\_

Date

\_\_\_\_\_

National Chairperson of Organization

\_\_\_\_\_

Date