



*Please complete this form if you are seeking operating funding for an integrated resource stewardship office or guardian watchman program. Alternatively, if you are seeking funding for a specific conservation initiative, please use the Project Funding Application form.*

*Once all fields in this funding application are completed, please submit this document by email to Coast Funds at [projects@coastfunds.ca](mailto:projects@coastfunds.ca). If you have any questions regarding the application process, we can be reached at 604-684-0223.*

Applicant Organization (Legal Name)	Participating First Nation Allocation

Start Date (dd mmm yyyy)	End Date (dd mmm yyyy)
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#### Executive Summary

*Please provide a brief summary of the key conservation work that will be performed this year.*

*Please describe any new initiatives or changes in conservation priorities that are planned this year.*

#### Key Objectives This Year

*Please identify at least three objectives that are specific, measurable, attainable, relevant and time-bound.*

- 1.
- 2.
- 3.
- 4.
- 5.

COAST FUNDS

Suite 750-475 West Georgia Street, Vancouver, BC, V6B 4M9

### Conservancies, Parks, and Protected Areas

*Please identify the conservancies, parks, and protected areas to be included in work this year and note the type of work to be performed*

Protected Area Name	Type of Work	Description
1.		
2.		
3.		
4.		
5.		
6.		
7.		
8.		
9.		

### Conservation and Scientific Research Projects

*Does your annual work plan include scientific research? (e.g. collection of sample data for water chemistry, isotope, genetic analysis, etc.)*

Yes

No

*Please describe the research that is planned this year. Note any anticipated results and how it will inform the Nation's decision making.*

*Please note the species that are a focus of the planned research project(s) this year.*

- |    |    |
|----|----|
| 1. | 4. |
| 2. | 5. |
| 3. | 6. |

### Science, Research, and Conservation Partnerships

*Please list your organization's key partners including universities, non-governmental organizations, and other First Nations.*

Partner Organization	Type	Expected Outcomes This Year
1.		
2.		
3.		
4.		
5.		
6.		
7.		
8.		

### Habitat and Ecological Restoration Projects

*Does your annual work plan include habitat or ecological restoration or enhancement work? (e.g. silviculture, stream restoration)*

Yes

No

If yes, approximate area of project site(s) (in hectares):

*Please describe the specific project site(s) and scope of work focusing on the recovery of degraded or damaged ecosystems.*

*Please note the species that will specifically benefit from the habitat or ecological restoration work this year.*

1.

4.

2.

5.

3.

6.

### Ecosystem-based Management Conservation Capacity Building

*Please describe any training or workforce development initiatives that are planned this year to build capacity for conservation initiatives.*

### Traditional Knowledge

*Please check and describe each of the following areas of traditional knowledge that directly relate to work plan activities this year.*

Language

Access to traditional foods

Engaging elders to transfer knowledge to youth

Traditional stewardship practices

Protection and restoration of cultural assets  
(e.g. CMTs, historic village sites, petroglyphs)

Expression of art or history

### Provincial Resource Development Referrals

*Is your organization responsible for developing written responses to resource development referrals from the provincial government?*

Yes

No

If yes, how many referrals do you expect to receive this year:

*Please explain how the Nation employs ecosystem-based management principles and conservation management plans when responding to resource development referrals.*

### Regional Monitoring

*Does your annual work plan include the protection and monitoring of the Nation's traditional territory? (e.g. Guardian Watchmen)*

Yes

No

If yes, approximate area monitored (in hectares):

*Please describe the activities focused on monitoring compliance with conservation management plans this year.*

Number of people that are currently employed as Guardian Watchmen:

Number of new Guardian Watchmen positions that will be created this year:

Funding Request and Payment Schedule		
<i>Please identify the total funding you are requesting from Coast Opportunity Funds and the dates you would prefer payments.</i>		
Requested Payment Date (dd mmm yyyy)	Associated Project Milestone	Requested Amount
1.	Initial Advance Payment	\$
2.	Progress Payment	\$
Total Funding Requested from Coast Funds:		\$

Other Project Funding			
Funding Source	Type	Current Status	Amount
			\$
			\$
			\$
			\$
			\$
			\$
			\$
Total Other Funding Sources:			\$
Funding Requested from Coast Funds:			\$
Total Project Funding:			\$

Risk Factors and Risk Mitigation Strategies	
<i>Please identify three key risks affecting your work plan and how you will monitor and mitigate the risks as the work plan is implemented.</i>	
Risk Factor	Mitigation Strategy
1.	
2.	
3.	

Current Employment				
<i>Please provide the current employment for your organization.</i>				
Job types	Total number of existing jobs	Of total existing jobs, # held by First Nations	Hours of employment per week (average)	Total months worked per year
Direct permanent full-time jobs:			35+ hours/week	12 months/year
Direct permanent part-time jobs:			hours/week	12 months/year
Direct seasonal jobs:			hours/week	months/year
Current Full-Time Equivalent (FTE) Employment:				

New Employment (Job Creation)				
<i>Please provide an estimate of the new employment this project is anticipated to create.</i>				
Job types	Total number of new jobs	Of total new jobs, # held by First Nations	Hours of employment per week (average)	Total months worked per year
Direct permanent full-time jobs:			35+ hours/week	12 months/year
Direct permanent part-time jobs:			hours/week	12 months/year
Direct seasonal jobs:			hours/week	months/year
Direct temporary jobs (e.g. contract or consulting):			hours/week	months
<i>Please list the job titles/roles for the new employment positions that will be created:</i>				
Proposed Permanent New Full-Time Equivalent (FTE) Employment:				

Primary Contact Information			
Name	Title		
Email	Work Phone	Work Extension	Cell Phone
Mailing Address	City	Province	Postal Code

## Attachments

Please attach the following documents as part of your complete funding application:

### **Annual Operating Plan**

An operating plan for your organization that outlines an implementation plan for the current/upcoming fiscal year that will be accomplished in order to achieve the Nation's long-term strategic conservation goals.

### **Detailed Annual Budget**

The detailed annual budget should clearly indicate a budgeted cost for each key expense category that is planned for the current/upcoming fiscal year. The budget should also include all anticipated sources of revenue for the current/upcoming fiscal year. Please ensure that your accounting system is configured to provide a detailed financial report that aligns with the budget that is attached to this funding application. A detailed financial report will be required as part of the Final Report.

### **Current Financial Statements**

Financial statements (balance sheet, income statement, cash flow statement) for the most recent year (audited if available).

### **Strategic Plan** *(if available)*

A multi-year strategic plan for your organization that outlines the Nation's long-term strategic conservation goals as well as your organization's mission, vision and values for conservation initiatives in the Nation's traditional territory.

### **Council Resolution**

A signed resolution from the appropriate council of a Participating First Nation. Please include the following:

- Date the resolution was passed
- List of the councillors passing the resolution
- Amount requested
- Organization that is authorized to receive funding payments

### **Board Resolution** *(only required if the work plan will be directed by a separate Board than the Nation's Council)*

A signed resolution from the Board of Directors of the organization applying for funds.

## Authorization

I (we) certify that the information in this application and associated attachments reflect an accurate description and estimate of the costs, job creation, and financial projections for the proposed project.

I (we) agree that information provided in this application may be shared with Coast Opportunity Funds staff, Board and consultants.

I (we) authorize Coast Opportunity Funds to make enquiries of such persons or organizations operating in the project's field of activities as Coast Opportunity Funds deems necessary to reach a decision on this application.

I (we) understand that the application may not be approved, and agree to follow Coast Funds' procedures for discussing the Board's funding decisions.

I (we) have read and understood Coast Funds' policy on dealing with harassment of staff by clients, and will adhere to the policy ([view policy online](#)).

By entering my name here electronically, I authorize all of the above for this application:

Name of an Organizational Signing Authority

Title

Date (dd mmm yyyy)