

Application number (For Toro	onto Community Hous	ing use only):
Part A : Applicant informat	ion	
Type of application		
Tenant	Tenan	t group
Applicant name (if it is a tena	nt group, list all the m	embers):
Address:		
Region: Central	East	West
Email (if it is a tenant group, l	ist the primary contac	t):
Phone number (if it is a tenan	t group, list the prima	ry contact):

The personal information requested in this form is collected under the authority of *s.* 28(2) the Municipal Freedom of Information and Protect of Privacy Act. The information will be used for the Centre Community Funds purposes. If you have any questions about the collection of this information, please contact the Information Specialist, 931 Yonge Street, Toronto, ON, M4W 2H2, 416-981-5500.

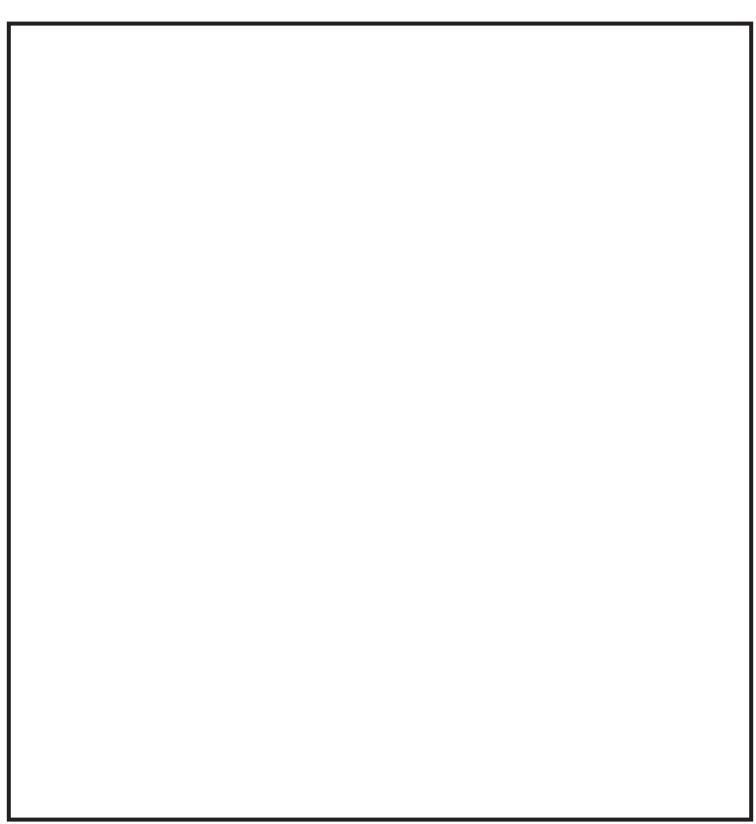
Part B: Community support

List a minimum of eight tenants from your building/townhouse committee that support your application. No more than two signatures from the same household will be accepted.

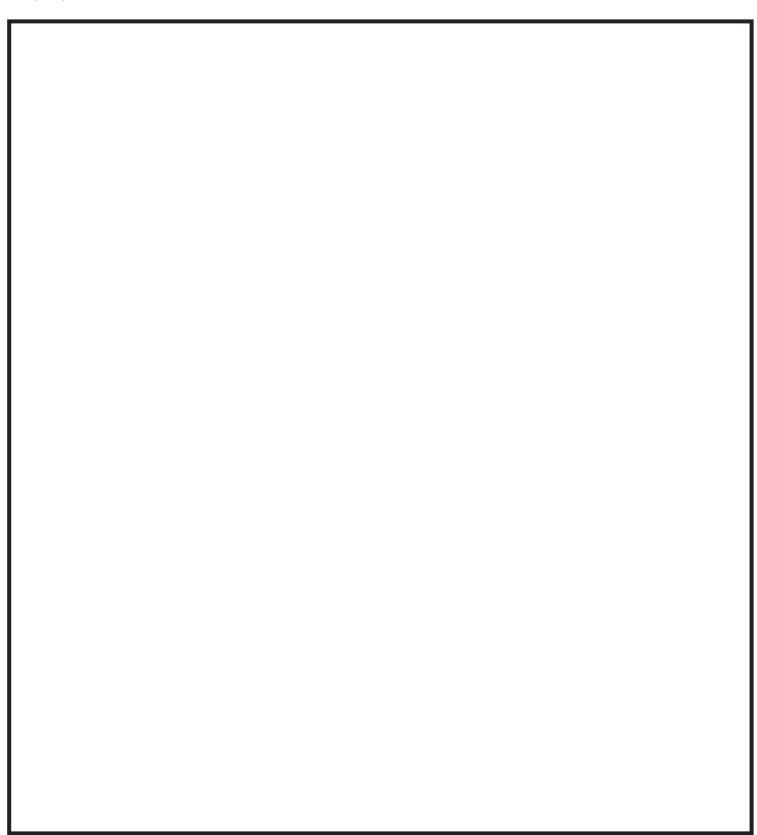
#	Tenant name	Address	Phone number or email	Signature
1				
2				
3				
4				
5				
6				
7				
8				

Part C: Project information

Project name:
Expected start date:
Expected end date:
Project type:
Single event/activity Multiple events/activities
1. What do you hope this project will accomplish?
Connect tenants to services and opportunities
Develop partnerships and networks to deliver local programs and services that will improve social conditions and promote safer communities
Increase tenant participation in activities that influence tenants' quality of l
Describe the project and why you are proposing it. Please specify in the space provided or attach your document.



	hich areas of the CABR S ck all that apply.	Strate	gy's eig	tht-po'	int plan relate	es to your project?
	Decent and fair housing	g			Community	centered safety
	Meaningful economic investment				_	om police culture
	Healthy children, youth families	ı, and	i		Addressing a	cial support networks anti-Black racism
	Access to culturally responsive health and health services	ment	al		and cultural	redress
3. W	ho will benefit from this	proje	ect? Sel	ect yo	ur target popı	ulation.
	Children		Senior	ſS		Persons with disabilities
	Youth		Familie	es		UISaviiilies
	Adults		Comm	unity		
	2SLGBTQ+		Other:	,		
	se describe how this prok k racism. Provide details	•			•	



4. H	ow many tenants do	you ex	pect to participate?
Г			
5. Ho		ort ba	ck on the success of your project? Check all that
	Photos		Feedback from participants
	Short video		Attendance sign-in sheets
	Report		Other:

attach your documents.				

Part D: Partners

Are there any individuals, agencies, or groups that are supporting this project? Please provide a list and their role.

Partner	Role
	(e.g., in-kind donations, books, school supplies, monetary donation, staffing resources)

Part E: Resources

What resources do you need for your project? Please provide details below or attach your document.

Activity	Resources required What items or services do you need and how many? (if applicable)	Requested amount
Example: Service Fair	Refreshments - tea, coffee, cookies for 100 people	\$500.00
Total amount reque	sted	

Part F: Declaration

Che	ck off each box to to indicate your understanding and agreement.
	Resources requested will only be used for eligible expenses listed and solely for the purpose of the project. Resources will not be utilized for personal use.
	All funds will be reconciled by submitting original itemized sales receipts along with a completed expense report form and any unused funds within 14 days of project completion. Expenses cannot be incurred before the date an application is approved.
	Funded applicants are responsible for both the use and reconciliation of funds.
	All successful applicants will submit a brief summary report once the project is completed. The summary includes highlights and challenges of the project, how many tenants participated in the project and/or tenants' testimonials. Any photos or video provided must have tenants' consent. A project template will be provided.
	All funded applicants must reconcile funds before seeking further resources. Funded applicants will not receive further resources if funds are misused or unreconciled.
	All decisions made by The Centre for Advancing the Interests of Black People (The Centre) are final. Feedback for rejected applications will be provided upon request. Tenants are allowed to resubmit rejected applications.
App	licant signature (if it is a tenant group, use primary contact's signature):
App	licant name (if it is a tenant group, use primary contact's name):
Date	e:

Get in touch





torontohousing.ca/CABR



416-558-3490



@TOhousing



@TorontoCommunityHousing



@torontohousing



@TorontoCommunityHousing



TheCentre.EducationAdvocacy@torontohousing.ca



To request this document in an accessible format or for a translated version, please contact help@torontohousing.ca or call 416-981-5500.