

Individual Project Application Form

Title of the project:

The information provided in the **Individual Project Application Form** describes the project, sets objectives, and defines projected outcomes. Additional documents may be attached to this form. The Individual Project Application Form **must** nevertheless be completed and submitted on-line or to the Foundation Office c/o the Information Office. You are invited to view the Guide for examples and assistance.

Proposed time schedule

Oct. 31, 2017	Call for projects
Nov. 20, 2017	Deadline for submission
Nov. 27, 2017	Re-submission deadline (if applicable)
Dec. 1, 2017	Selection deadline
Dec. 8, 2017	Announcement of awarded project funds

Project Eligibility (10 points)

Relation to College Mission

Describe how the project contributes to a diverse, innovative, student-oriented and community-driven learning experience.

Describe how the project will enrich or complement your studies in your chosen program at Heritage College.

Describe how the project encourages participation in student internships or international, student-life, socio-cultural, humanitarian, environmental, or sports activities.

Project Description (10 points)

Basic Information

Project date(s):

Project location:

Within Canada

Yes /No

International

Yes /No

Will any other people be participating in the project? If so, explain their role(s).

Main activities

Project's main activities:

Outcomes (10 points)

Goals

Main project objective:

Benefits of project to recipients, participants, the College, and the Foundation:

Plans to share project results with the College community:

Method of measuring project success:

Student or Project Leader's Information

Last name: _____		First name: _____	Date of Birth: _____
Permanent address: _____			
City: _____		Province: _____	Postal Code: _____
Phone: _____		E-mail: _____	
Address while attending Heritage College: _____		Same as above: <input type="checkbox"/>	
Mailing address: _____			
City: _____		Province: _____	Postal Code: _____
Phone: _____		E-mail: _____	

Educational Information

Student ID Number: _____	Campus: <input type="checkbox"/> Gatineau	<input type="checkbox"/> Campbell's Bay
Full-time Student <input type="checkbox"/>	Part-time Student <input type="checkbox"/>	
Program: _____		
I will be a Cégep Heritage Student for the duration of the project		Yes <input type="checkbox"/>

Declaration

➤ I understand that the project I will be participating in is applying to the Cégep Heritage College Foundation for financial assistance to help cover my costs in participating. The Application does not guarantee a financial contribution as the number of projects can surpass available funds.	Yes <input type="checkbox"/>
➤ I attest that the information I have provided is complete and accurate to the best of my knowledge.	Yes <input type="checkbox"/>
➤ I understand and agree that if my project receives funding, I may be invited to become a Foundation Ambassador. While, this is not a condition, I understand that donors appreciate receiving feedback and thanks from recipients.	Yes <input type="checkbox"/>

(if printed)

_____	_____
Participant's signature	Date

Authorization and Photo Release

- I give my permission to the College to access my student file:
to confirm academic standing any other essential information relevant to this application. Yes
- I agree that my name and photo may be included in a Press Release and in various
College and Foundation publications, web or social media sites. Yes
- I agree that my name and photo may be included in a Donor's Press Release and/or his
publications, web or social media sites. Yes

(if printed)

Applicant's signature

Date

If the participant has not attained the age of majority, a parent or legal guardian must sign the following paragraph.

I, the undersigned, being the parent (or guardian) of the participant whose signature appears above, agree to the content, declaration and release of this application. I furthermore attest that the applicant has been informed and understands the above declaration, authorization and photo release.

(Original Printed authorization is required if student has not attained age of majority)

Signature of Parent or Legal Guardian

Date

The information provided will assist the Selection Committee in evaluating the project application.
The number of participants may have an influence on the amount of funds disbursed.

Thank you for your interest in the Cégep Heritage College Foundation.
This form **must** be completed, printed, signed and given to your Project Leader for submission.

