

BCRTA Heritage Committee Grant Application revised Jan. 2018

Name of RTA Branch responsible for this project _____

Name of Contact Person _____

Address _____

Phone _____ Email _____

Signature of Branch President _____ print _____

Date of application _____ Project start date _____

1. Project Description

2. Branch motion

3. Please attach Plan of Action

4. Project Budget

Confirmed sources of funding	Revenue
_____	\$ _____
_____	\$ _____
_____	\$ _____
BCRTA grant request	\$ _____
Total of confirmed and requested funding	\$ _____

5. Indicate specifically how the BCRTA grant will be spent.

6. List BCRTA retired educators involved in project.

7. Describe how this project supports local educational heritage.

8. Describe the long-term value of the project to retired educators, students and community.

9. Describe any follow-up activities and /or research access by others.

10. Describe how this project will be publicized.

11. Describe how the BCRTA support will be acknowledged.

12. Interim Report due within 8 months of funds received _____

Completion Report _____

Application deadlines are May 1st and October 15th

Mail: BCRTA #100-550 West 6 Avenue, Vancouver V5Z 4P2
