



**PROGRAM
of Cooperation and
Exchange**
between New Brunswick and Manitoba



Year 2022-2023

- Component: **Culture**
 Youth
 Community radio
 Other (specify)

For administrative use

Project:	File:
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1 PROJECT NAME

2 PROJECT DURATION

Start date	End Date
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3 NAME AND CONTACT INFORMATION OF APPLICANT ORGANIZATION

Non-profit association. If there is more than one organization, attach a sheet and enter all requested information for each.

Name
Address
Telephone , **Extension** **Fax**
Email
Website
Is it a for-profit organization? Yes No
Name of President Ms. Mr.

Name and title of the person in charge Ms. Mr.
Telephone , **Extension** **Fax**

4 NAME AND CONTACT INFORMATION OF THE OTHER PROVINCE'S ORGANIZATION

Name
Address
Telephone , **Extension** **Fax**
Email
Website
Is it a for-profit organization? Yes No
Name and title of the person in charge of the project Ms. Mr.
Telephone , **Extension** **Fax**

5.1 Briefly describe your project (nature of planned activities).

5.2 Objectives

5.3 Timeline for duration of the activity

5.4 Needs to be met (expected impacts)

5.5 Target audience

5 PROJECT DESCRIPTION (CONT'D.)

5.6 Predictable impacts (short-, medium- and long-term impacts of this activity in New Brunswick and Manitoba)

5.7 Individuals and organizations associated with the activity(activities) (if applicable)

	NAME	FUNCTION
People		
Organizations		

5.8 Description of the steps already taken by the participating organizations and timeline for completion

EXPENSES		
ONLY EXPENSES DIRECTLY RELATED TO THE DELIVERY OF THE PROJECT ARE ELIGIBLE.		
<i>Administrative and management costs of organizations (salaries, current operating, capital or movable asset acquisition expenditures), regular communication costs, and hospitality expenses are excluded.</i>		
Transportation, accommodation, meals		\$
Professional services		\$ \$ \$
Purchase or lease of miscellaneous supplies (specify)		\$ \$ \$ \$
Communications (specify) <i>Advertising, production of reading material, etc.</i>		\$ \$ \$
Other expenses (specify)		\$ \$ \$
	TOTAL EXPENSES	\$

REVENUE		
Contribution of organizations <i>Name each organization and indicate the nature of their contribution (in money or services).</i>		\$ \$ \$ \$
Government contributions * <i>Indicate whether they are at the federal, provincial or local levels, the relevant department and whether or not the grant has been confirmed.</i>		\$ \$ \$ \$
Other revenue sources <i>Specify the amount and source of any other revenue sources. (sponsorship or grant)</i>		\$ \$ \$ \$
Financial assistance requested **	IGA	\$
	TOTAL REVENUES	\$

* Clearly indicate all sources of funding. A federal contribution will not be considered part of Manitoba's contribution.

** The contribution from the Government of New Brunswick must not exceed 50% of the total project costs or be greater than that of Manitoba.

7

PREVIOUS ASSISTANCE

Has the applicant organization ever received funding under this agreement?

Yes

No

If yes, please specify:

YEAR	PROJECT TITLE	AMOUNT
		\$

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APPLICANT ORGANIZATION COMMITMENT

(To be signed by the applicant organization or its duly authorized representative.)

We certify that the information provided is accurate.

We are committed to the project as described above.

We agree to disclose the assistance obtained under the Program of Cooperation and Exchange between New Brunswick and Manitoba in all communications (correspondence, advertising, pamphlets, publications, etc.).

We also agree to provide an activity report, including a financial statement related to the project, no later than one month after the end date of the project mentioned in Question 6.

Name of President

Name of the person in charge

Signature

Signature

Date

Date

Complete the form and send it to one of the following addresses:

IF YOU ARE FROM NEW BRUNSWICK:

Department of Intergovernmental Affairs
Francophonie and
Official Languages Branch
Chancery Place
P.O. Box 6000
Fredericton, New Brunswick E3B 5H1

Telephone: 506-260-5469
E-mail: Anicet.Buranga@gnb.ca

IF YOU ARE FROM MANITOBA:

Francophone Affairs Secretariat
Legislative Building
46 450 Broadway Avenue
Winnipeg, Manitoba R3C 0V8

Telephone: 204-945-4915
E-mail: FLS-SLF@leg.gov.mb.ca