

MN–S and Government of Canada's Reaching Home Strategy

Reaching Home Non-Designated Indigenous Stream Reaching Home Rural & Remote Stream

2024-2025 application



Métis Nation-Saskatchewan (MN-S) 310-20th Street East Saskatoon, SK S7K 0A7 306.343.8391 metisnationsk.com

This application is for Housing Services, Prevention and Shelter Diversion, Client Support Services, Capital Investments, and Coordination of Resources and Data.

Which stream are you applying for? Please check one box only

Reaching Home Non-Designated Indigenous Stream

Reaching Non-Designated Home Rural and remote stream

PLEASE READ THE APPLICATION GUIDE CAREFULLY BEFORE COMPLETING THIS APPLICATION FORM <u>**Please fill out separate applications for separate projects**</u>

Funding Streams

NON-DESIGNATED INDIGENOUS AND RURAL AND REMOTE

Executive Summary – Word limit to 500 characters (with spaces) per summary question

Applicant Name:	Priority area:	
Project Name:	Housing Services	
Project Location:	Prevention & Shelter Diversion	
RH contribution request:	Client Support Services	
Other contribution:	Capital Investments	
Total Project amount:		
Project Details and Summary:		
Community Needs:		
Partnerships and Community Supports:		
Measurable and Achievable Outcomes:		
Sustainability of the Benefits of the Project:		
Process to Measure success:		
Program History and Successes:		
Past Reaching Home Partnerships and Brief History:		
Environmental Impacts:		

<u>Part 1</u>

1.1 Organization Identification				
Organization type	te 🗌 N	ot for profit	Munic	cipal Indigenous
Legal Name		Phone N		Fax Number
Mailing Address		Website	Address	
Contact Name and Title		Phone N	lumber	Email
Language of	Incorporation N	lumber (Cha	arters/letters	Incorporation Date (MM-YYYY)
Correspondence	patent)	patent)		
French				
Business Number <i>(Canada Re</i>	evenue Agency)	GST Nur	nber	PST Number
Registered Charitable Tax Nu	ımber		Tax refund perce	entage (GST)
From among the organization staff		If yes, have you obtained union concurrence?		
affected by the proposed activities, is any staff unionized?		Yes No It is not required.		-
Yes No		Note: If yes, a <u>Copy of Union Concurrence</u> required upon submission		<u>concurrence</u> required upon
Organization's main activitie	s and mandate			

1.2 Legal signing officers

	Contribution Agreement (according to Letters Patent or other incorporating documents)				
Ho	w many signatures are required to bind t	the applying organization into a	Number:		
leg	al agreement?				
off	m among these authorized signatures, v icer(s) whose signature is always require anization into a legal agreement?	Position Title:			
	Title	Name	Specimen Signature		
1	Title	Name	Specimen Signature		
1	Title	Name	Specimen Signature		

	w many signatures should appear on app orts submitted?	Number:		
From among these authorized signatures, what is the position title of the			Position Title:	
officer(s) whose signature is always required on payment claims or reports				
submitted?				
	Title	Name	Specimen Signature	
1				
2				
3				

1.3 Accounting Practices

Accounting is done internally				Accour	nting is done by an
Bookkeeper's name		Name of	f the external firm (if appli	cable)	Telephone number
Manual system Computerized		Name of software used			
system	-				
What is the fiscal year-end of your	organizatio	on?	Does your organization contract external auditors to		
			conduct financial audits?	P [Y	es 🗌 No
In the past three (3) years, has you	ır	If yes,	were there any	If yes, h	nave those issues
organization been reviewed, audit	ed, or	irregu	larities or issues	been re	esolved and measures
investigated by the federal govern	ment,	regard	ling your organization's'	diligent	tly put in place to
provincial government or another	public	financ	ial management	preven	t reoccurrence?
body created under the law of a pr	ovince?	praction	ces?	Yes	No
Yes No		Ye:	s 🗌 No		
Do you have liability insurance?	If you have liability insurance, please		ty insurance, please	Worker	r's Compensation
🗌 Yes 🗌 No	specify the amount:		nt:	Premiu	m Rate (per \$100):

1.4 Amounts Owing to Canada

Do you owe any amount to a Government of Canada department or agency?

No No

Yes

If so, please specify:

	Amount Owing	Nature of the amount owing (i.e. tax, penalty, overpayment)	Government department or agency to which the amount is owing
Ş	\$		

1.5 Lobbying Efforts / Involvement of Public Servants

Are you presently a registered lobbyist?	Office of the Registrar of seek outside assistance t contingency fee for such At the agreement stage, above requirements con Lobbyists may register of charge. For further infor	applicants requesting funding of \$25,000 or more will be asked to declare the cerning the registration of lobbyists and contingency fees have been met. nline with the Office of the Registrar of Lobbyists (<u>www.orl-gdl.gc.ca</u>) free of mation, please contact the Office of the Registrar of Lobbyists by telephone at		
federal government	(613) 957-2760 or email at <u>questionslobbying@orl-bdl.gc.ca</u> been any involvement of past overnment public servants in invation of this proposal? No			

Part 2 Project Details

2.1 Project Name	2.2 Length of Project
	1 year ending March 31 st 2025
2.3 Location of Project activities (if different than applicant's mai	ling address).
2.4 Please indicate if the facilities for <u>Capital Investment</u> projects	are owned or rented/leased (If rented or leased, a
minimum 5-year lease and letter of support for project activities	from landlord are required). Please provide
documentation.	
2.5 Please provide population size of community where project a	ctivities are to take place.
2.6 Project areas of activity (check all that apply)	
Emergency shelter facilities	
Transitional housing facilities	
Supportive housing facilities	
Non-residential facilities	
Please check the type of expense that applies to this pro	ject
Housing Services	
Housing Placement.	
Emergency Housing Funding	
Housing set-up	
Other	
Prevention & Shelter Diversion	
Discharge Planning Services	
Help obtaining or retaining housing	
Advice on budgeting, credit counseling and debt consolidation	
Legal advice, advocacy, and legal representation in order to ave	ert eviction
Short-term financial assistance to help avert eviction or loss of	housing with rent, rental arrears, utility deposits or
payments	

Client Support Services
General Client Supports
Clinical and treatment services
Economic integration services
Social and community integration services
Other
Capital Investments Renovation of emergency shelters, transitional housing, permanent supportive housing, or non-residential facilities
Repairs of damages resulting from housing placements
New construction of transitional or permanent support housing, or non-residential facilities
Purchase of transitional housing, permanent supportive housing, or non-residential facility
Purchase of furniture, appliances, machinery, electronic equipment, and vehicles
Professional fees
Other
2.7 Project details and summary. Must include project activities and links to Project Areas of Activity selected in
section 2.5. Maximum word limit to 2000 characters (with spaces).
2.8 Project timeline and work plan descriptions. Maximum word limit to 1500 characters (with spaces).
2.9 Community Needs (what are your community needs and how your activities will meet these needs). Maximum
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2.13 The sustainability plan must demonstrate how the benefits of the project will be sustainable and activities maintained after Reaching Home funding ends. If an exit strategy forms part of the sustainability action plan, then the exit strategy must demonstrate a minimum amount of disruption to clients. Maximum word limit to 1000 characters (with spaces).

2.14 Process to measure success. Maximum word limit to 500 characters (with spaces).

2.15 Program History and Successes (description of specific program that is connected to proposed project and past successes of this program). Maximum word limit to 1000 characters (with spaces).

2.16 Please discuss past Reaching Home (formerly HPS) partnerships with brief project and funding details. Maximum word limit to 1000 characters (with spaces).

2.17 Environmental impacts (if applicable). Maximum word limit to 500 characters (with spaces).

Part 3 Beneficiaries

Please provide information on the client groups (those who are homeless and those at risk of homelessness) served as part of your project. Please check all that apply.

		Housing St	tatus	
Chronically Homeless (Individuals with a total of at least 6 months (1180 days) of homelessness over the past year or recurrent experiences of homelessness over the past 3 years, with a cumulative duration of at least 18 months (546 days)			: Homelessness manently housed through a or exiting an institution)	
Gender	Ages	Sp	ecial Needs	Populations of Interest
General population Male Female Non-Binary	General population Children (0-14) Youth (15-30) Adults (31-64) Seniors (65+)	People w People w mental healt People w Survivors	vith HIV/AIDS Families s of domestic violence Q+ Community	 Indigenous peoples% Immigrants% Refugees% Veterans% Reported % of total people served

Part 4 (For Capital Investment Projects Only)

This section must be completed by all applicants seeking funding for capital investment projects to ensure that their application and sustainability plan address all the key elements required of an eligible capital project. This section contains elements that will be verified during the selection process by Community Advisory Board.

Sustainability Plan

Yes

Long-term benefit for the community

Indicate how the purchased equipment or furniture, or renovated facility, will remain in the long term for the benefit of individuals who are homeless or at imminent risk of homelessness?

Operation for five years after the project ends

Indicate the operational impacts of the project (i.e., additional staff or services needed once the project is completed or additional demand for health and social services?).

What are the relevant and related operational costs identified for the project? (Include any costs related to additional staff and service requirements).

Show what operational funding sources will cover the total operating costs related to the project? (i.e., a balanced annual operating budget for five years following the end date of the project).

Identify all the partners and operational funding sources identified in the sustainability plan?

Have you read and do you understand the Capital Investment Sustainability Requirements from the Application Guide, and have you completed the Sustainability Checklist?

Legal Signatory Name (please print)	Title(please print)	✤ Signature	✤ Date✤ (dd-mm-yy)

Part 5 Project Funding Details

No

Reaching Home (formerly HPS) funding Contribution requested amount	\$
Other sources of contribution	\$
Total project amount	\$

Please name all matching cash and in-kind contributions to the project, summarize partner roles/responsibilities and financial or in-kind contribution value.

Include all partner organizations, government agencies (of any level – federal, provincial, municipal), businesses, non-profits, individuals, or others as well as partnership letters as per the Application Guide instructions.

Do not include contribution partners of your organizations' operational budget. Only include contributors or partners of the project proposed for Reaching Home funds.

Contributor	Type of Organization	Roles and Responsibilities	Financial or In- Kind Value
Total project amo	\$		

Mandatory Supporting Documents required. Letter(s) of commitment are required to confirm contributions declared in this application form as part of the financial and/or activity reporting.

Part 6 Budget Negotiation Notes

Legal Name of Organization:
Project Number: (completed by MN-S after submission)
Proposed Project Name:

EXPENDITURE CATEGORIES

There are 7 cost categories for all project costs. All costs must be linked to project activities included in the proposal and to functions that are project specific. For example, wages/salaries of project staff are in Category 1(i.e., project managers, case managers, housing placement workers, data co-ordinator), and wages/salaries of head office management are in category 8 (payroll, HR, admin). Reimbursement will be supported by invoices (payroll and/or travel claims, as appropriate) and will be subject to monitoring and audit. Examples of costs for which a contribution can be considered include, but are not limited to:

2024-2025	Amount Requested	Detail Description / Comments			
1. Staff Wages					
Staff Wages includes Mandatory Employment Related Costs (MERCs) which refer to payments an employer is required by law to make in respect of its employees such as El and CPP/QPP premiums, workers' compensation premiums, vacation pay and Employer Health Tax.	\$ -	Provide details (i.e., hourly rate, number of hours, number of weeks, MERCs) by position.			
Benefits which refer to payments an employer is required to make in respect of its employees by virtue of company policy or a collective agreement. Examples of Benefits include contributions to a group pension plan or premiums towards a group insurance plan, extended illness and maternity leave, termination pay where warranted by provincial employment standards and organizational policies in existence at the time, severance pay where warranted by provincial labour standards, etc.	\$				
Sub-Total 1: Staff Wages	\$ -				
2. Professional Fees	2. Professional Fees				
Professional fees – sub-contracting contracted specifically to support the project (e.g., bookkeeping, janitorial services and supplies, community plan facilitator, information technology, equipment maintenance services and security. Legal fees are noted separately below); all fees related to the purchase, pre-development, construction, or renovation of facilities are noted in Category 5: Facilities.	\$				
Legal fees (e.g., allowance for costs related to review of lease for new project site premises)	\$ -				
Sub-Total 2: Professional Fees	\$ -				

3. Travel		
Staff and volunteer travel directly linked to assisting clients (e.g., housing placement or mobile counseling); travel for meetings and networking is noted in Category 7: Administrative Costs	\$	Provide details (i.e., means of transportation, number of kilometers, KM's rate)
Sub-Total 3: Travel	\$	
4. Capital assets (except facilities)		
Capital assets of more than \$1,000 (excluding taxes). By default, all capital assets remain the property of the Recipient at the end of the project, unless an agreement for their disposition is prepared. List all capital asset purchases.	\$ -	Provide list of individual assets and specify which will not remain with the recipient at the end of the project.
Furniture of more than \$1,000 excluding taxes	\$	
Appliances of more than \$1,000 excluding taxes	\$	
Sub-Total 4: Capital assets (except facilities)	\$ -	
5. Facilities (capital investments)		
Cost of purchasing land and/or building(s), including refundable deposits;	\$	Provide details of market value of property.
Construction or renovations to facilities: costs of labour and materials, general contractors, professional fees for project management, site supervision and inspections	\$	Provide details of preliminary cost estimates for the construction or renovation and market value of property.
Pre-development costs: property zoning and assessment fees, environmental assessments, architectural drawings and advice, engineering drawings and advice, building permits, licenses, and taxes	\$	Provide details of the different professionals involved and their fees
Sub-Total 5: Facilities (Capital investments)	\$ -	Proof of market values are required.
6. Other Activity Related Project Costs		
This includes costs directly associated with the proj	ect activities that are not	included in any other budget category.
Rent, lease (including applicant owned premises) and repairs, leasehold improvements	\$	
Furniture costing \$1,000 or less, excluding taxes	\$	
Staff disability supports	\$	

\$

-\$

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Staff training (specify)

Conference attendance fees

Conference costs (meeting room rental, guest speakers, etc.)	\$		
Signage	\$ -		
Utilities	\$ -		
Equipment lease, rental, or purchase (including computers, fax machines, etc.; meter charge for photocopies, repair and maintenance cost item are included in cost type 7: Administrative Costs)	\$		
Computer software and licenses directly related to delivering project activities including those that support the use of a client tracking system	\$		
Costs associated with use of applicant-owned assets other than premises (e.g., computers and other equipment, furniture, etc.)	\$ -		
Memberships (professional and organizational), affiliation fees and business licenses and permits	\$ -		
Advertising (newspaper ads, flyer production, web page design etc.)	\$ -		
Reference materials (books, periodicals, subscriptions, etc.)	\$ -		
Telephone and/or fax line installation and charges	\$		
Internet installation and monthly fees	\$ -		
IT maintenance	\$ -		
Printing	\$ -		
Staff professional development (courses required by staff to ensure the success of the project, must not be part of the routine development courses required by the organization's policies)	\$		
Postage	\$ -		
Costs related to transition/wind-down (termination and/or severance pay, other HR related costs, penalties for breaking leases, etc.)	\$		
Materials and supplies (e.g., food supplies, laundry supplies, cleaning supplies, personal or household items for facilities that house homeless people, office supplies for the facility)	\$		
Participant related costs : Expenses associated with the participants/clients of a particular project. Please note: for Reaching Home, these costs cannot be paid directly to clients (for example, in the case of a rent payment to avoid eviction, the recipient would reimburse the landlord directly). Reimbursement will be supported by invoices and will be subject to monitoring and audit. The following participant related costs are part of this expense category #6: Other Activity Related Costs, and may include, but are not limited to:			

Housing Emergency assistance	(e.g., rent and utilities)
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\$			
-			

Living expenses for individuals (e.g., vouchers for food, clothing, grocery, baby diapers, eyeglasses) items that remains with clients	\$ -	
Disability related supports	\$ -	
Disability related incremental costs	\$ -	
Professional fees related to participants/clients- contracting, sub-contracting (e.g., vocational assessments, needs assessments)	\$ -	
Dependent care	\$ -	
Materials and supplies, household items that remain with the participant/client	\$ -	
Travel associated with participants / clients (e.g., bus tickets)	\$	
Sub-Total 6: Other Activity Related Costs	\$ -	
7. Administrative Costs ((Administration)		
Staff wages and MERCS for staff working on the project indirectly (See Section 1 for details)	\$	
Benefits and other HR costs (See Section 1 for details)	\$	
Staff professional development - to cover basic training needs as per organization's existing policies; employment related requirements, which can include, but is not limited to, health and safety, first aid, CPR, self-defense, crisis intervention, anti-racism, sensitivity, conflict resolution, etc.	\$	
Staff and volunteer travel for meetings or networking (does NOT include monthly parking fees; travel to assist participants is noted in cost type 6 (Other Activity Related Project Costs)	\$	
Rent, lease (including applicant owned premises) and minor repairs and leasehold improvements	\$ -	
Utilities	\$	
Furniture	\$	
Signage	\$	
Equipment purchase, lease or rental (including computers)	\$	
Equipment repair and maintenance associated with everyday upkeep not covered by a lease or service contract (includes photocopy meter charges)	\$ -	
Computer software and/or license renewals and upgrades	\$ -	
Insurance (fire, theft, liability) and extended warranties	\$ -	
General insurance (ie directors' liability insurance)	\$ -	
Telephone and/or fax line installation and charges	\$	
Internet installation and monthly internet fees	\$	

IT maintenance	\$			
Postage and courier	\$			
Operational printing contracted externally (business cards, letterhead, printing of organizational or project brochures, etc.)	\$			
Professional fees – contracting (e.g. bookkeeping, janitorial services, IT, equipment maintenance services, security)	\$			
Office supplies (pens, paper, envelopes, subscriptions)	\$			
Bank charges	\$			
Travel associated with staff of the head office and board members (based on travel claims)	\$			
Memberships and affiliation fees (professional, inter- and intra-organizational, etc.)	\$			
Sub-total 7: Administrative Costs	\$			
	\$			
TOTAL Reaching Home COSTS				
	\$			
OTHER SOURCES OF FUNDING				
Cash	Value of contribution	Detail the cash and in-kind contributions from other sources (Organizations, amount of contribution, nature and value of contribution, purpose of funding)		
In-Kind	\$ -			
TOTAL OTHER SOURCES OF FUNDING	\$ -			
	\$ -			
TOTAL PROJECT COSTS				
	\$ -			
TO BE COMPLETED BY COMMUNITY ENTITY				
1. Are administrative expenses (Sub-totals 7 and 8) within the 15% of the HRSDC contribution? Yes 🔲 No 🗌				
If No, please explain:				
2. Are wages within the prevailing wage labour rate for this occupation in the community? Yes 🗌 No 🗌 Comments:				