2025/26 Housing & Homelessness Supports Grants

Comox Valley Community Foundation

Housing & Homelessness Supports Grants

To update the applicant or organizational information above, please email sigourney@cvcfoundation.org

This application is open to receive proposals with focus on housing security and supports for individuals who are unsheltered. To learn more about other granting opportunities, please contact sigourney@cvcfoundation.org.

Grant Eligibility

Organization Type*

Choices

Registered Charity as defined by Canada Revenue Agency Registered Society as defined by the Societies Act of British Columbia First Nation, municipality, or public body performing a function of government in Canada

Sponsorship

To apply for the Housing Insecurity and Homelessness Grants, registered societies need to work in partnership with a financial sponsor.

What is a financial sponsor?

A financial sponsor is a qualified donee (registered charity) who works in partnership with the registered society and agrees to take on an application and its activities as its own and engages a society as an intermediary to carry out the activities. The agreement should be made between organizations with a mutual alignment of values and missions. If an application with an agreement is successful, payment will be made to the registered charity, which will be responsible for disbursing funds to the registered society.

Sponsorship Agreement*

Please upload your signed Sponsorship Agreement.

Click here for blank Sponsorship Agreement.

File Size Limit: 2 MB

Name of Sponsoring Organization*

Character Limit: 250

Contact at Sponsoring Organization*

Character Limit: 250

Role or Title*

Character Limit: 250

Email Address*

Character Limit: 250

Phone Number*

Character Limit: 10

Organization Information

How many volunteers, including board members, does your organization currently have?*

Character Limit: 250

How many full-time staff does your organization currently have?*

Character Limit: 250

How many part-time staff does your organization currently have?*

Character Limit: 250

Organization Annual Revenue*

What is your organization's annual revenue?

Choices

\$49,999 and under \$50,000 to \$149,999 \$150,000 to \$499,999 \$500,000 to \$1,499,999 \$1,500,000 to \$4,999,999 \$5,000,000 - \$9,999,999 \$10,000,000+

Internal Controls*

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Does your organization have practices and procedures in place for internal controls and accountability?

Choices

Yes

2

No

Financial Controls*

Does your organization have a bank account in the name of the organization and a financial management system to track the income and expense transactions of the organization effectively?

Choices

Yes

No

When did your organization begin operating?*

Character Limit: 250

Please provide your organization's mission or mandate*

If your organization has your mission or mandate statement in an existing document, please upload it.

Character Limit: 500 | File Size Limit: 2 MB

Project Name

Project Name*

The name of the project is attached to each and every form within your process. This is the "identifier" for the request.

Character Limit: 100

Start Date*

Character Limit: 10

End Date*

Funds must be fully spent by December 31, 2026.

Character Limit: 10

Proposal Details

Project Description*

Please include a clear description of the proposed homelessness support project including the client demographics who will be served.

Character limit: 2,000 *Character Limit: 2000*

What community needs and priorities are addressed through the project?*

Please explain what the project will do to help provide support to our homelessness situation.

Character limit: 2,000 *Character Limit: 2000*

How does the program/ service involve those with living experience of homelessness?

Character limit: 2,000 *Character Limit: 2000*

Is this a new service or program?

Choices Yes No

Impact

Does the service provide a solution to a gap in our community?*

Please explain.

Character limit: 2,000
Character Limit: 2000

How will program participants be impacted?*

Please include impact metrics as applicable. For example the number of individuals served, the number of families participating etc.

Character Limit: 5000

How will the community at large be impacted?*

Character Limit: 5000

Is there another organization providing this service?

If so, how is this different, and how does it enhance the support available?

Character Limit: 5000

Describe ways your organization actively brings an equity lens to its work*

An equity lens recognizes that individuals with lived experience know what is best for themselves and their community and that their participation is integral to the success of the program. When the principle is used, the organization's work is guided by the needs and aspirations of the people being served. Those people served are provided meaningful opportunities for participation in project planning, leadership, evaluation, and promotion.

Character Limit: 2000

Partnerships

Agencies may submit a joint application and partnerships are encouraged.

Partnerships*

Will any other organization, networks or partners be involved in funding or carrying out the project (including in- kind support)?

Choices

Yes

No

Partnership Details

Please identify the role(s) and expertise and/or contribution they will bring to the project.*

Character limit: 2,000 *Character Limit: 2000*

How will this partnership strengthen your organization and the community?*

Character limit: 2,000 *Character Limit: 2000*

Funding Request

Funding requested*

Character Limit: 20

Have you applied for other funding to support this initiative?*

Choices

Yes

No

Sustainability

If this request is for an ongoing program or service, please outline your organization's long term plan for on-going funding.

Character Limit: 2000

Partial funding*

Will your proposal proceed with partial funding?

Choices

Yes

No

Partial Funding

Partial Funding Plan

How will the proposal be adapted?

Character Limit: 2000

Financial Information

Other Confirmed Sources of Funding Amount

Character Limit: 20

Other Confirmed Sources of Funding Organization Names

List name(s) of organization(s).

Character Limit: 250

Other Unconfirmed Sources of Funding Amount

Character Limit: 20

Other Unconfirmed Sources of Funding Organization Names

List name(s) of the organization(s).

Character Limit: 250

Budget

Please attach an organizational budget for 2024/25*

For support, please reach out to sigourney@cvcfoundation.org.

File Size Limit: 2 MB

Proposal budget*

Please upload an existing budget template for your proposal, or use the CVCF budget template. If you are unable to complete a budget template for your proposal, please contact CVCF for assistance.

File Size Limit: 2 MB

Final Notes

If you received a 2024/25 CVCF Housing & Homelessness Supports Grant, or a Community Enrichment Grant final reports are due December 31, 2025 unless other arrangements have been reached in advance. Additional grant funding will proceed only when final reports from prior grants are complete. Please contact us if you need help or have questions about the final reporting.

Your Feedback (Optional)

As part of our ongoing commitment to improve service and best practices in granting, the Community Foundation is gathering insight about the growing use and value of Artificial Intelligence (AI) as a support tool for grant writing. Responses are optional and will be compiled separately from your application for internal learning only.

Does your organization use AI for planning, writing or other uses?

Choices

No

Sometimes

Yes

Is it helpful in preparing grant applications?

Choices

No

Sometimes

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Yes