



Indigenous Languages Grants 2020–2021 Application Form

Submission Deadline: January 31, 2020

Mail completed application form and supporting documents to:

Attn: Indigenous Languages Grants
First Peoples' Cultural Council
1A Boat Ramp Road
Brentwood Bay, BC V8M 1N9

Questions? Contact us at 250-652-5952 or ALI@fpcc.ca and we'd be happy to help.

Applicant Information

FIRST NATION / ORGANIZATION

Please ensure the name you provide is the official/legal name for banking purposes.

Name:
Mailing Address:
City:
Province and Postal Code:

PRIMARY CONTACT / PROJECT LEAD

This person will be the primary point of contact for FPCC. They should be the person who will be managing the project, completing interim and final reports, and overseeing the budget.

Name:
Email:
Phone:
First Nation Affiliation(s) or Indigenous Heritage:
Title/Position:



ADDITIONAL CONTACT

Name:
Email:
Phone:
First Nation Affiliation(s) or Indigenous Heritage:
Title/Position:

Language and Community

What language(s) will be the focus for this project?

- | | |
|---|--|
| <input type="checkbox"/> Anishinaabemowin (Ojibway) | <input type="checkbox"/> Nsyilxcən |
| <input type="checkbox"/> Cree | <input type="checkbox"/> nuučaañuł |
| <input type="checkbox"/> Dakelh | <input type="checkbox"/> Nuxalk |
| <input type="checkbox"/> Dane-ᑭaa | <input type="checkbox"/> 'Wuikala |
| <input type="checkbox"/> Danezāgé' | <input type="checkbox"/> Secwepemctsin |
| <input type="checkbox"/> Dene K'e | <input type="checkbox"/> SENĆOŦEN / Malchosen / Lekwungen / Semiahmoo / T'Sou-ke |
| <input type="checkbox"/> diitiidʔaatx | <input type="checkbox"/> Sgüüxs |
| <input type="checkbox"/> Éy7á7juuthem | <input type="checkbox"/> She shashishalhem |
| <input type="checkbox"/> Gitsenimx | <input type="checkbox"/> Skwxwú7mesh sníchim |
| <input type="checkbox"/> Haítzaqvla | <input type="checkbox"/> Smalgyax |
| <input type="checkbox"/> Hul'q'umi'num'/Halq'eméylem/həñqəmiñəñ | <input type="checkbox"/> Southern Tutchone |
| <input type="checkbox"/> Ktunaxa | <input type="checkbox"/> Státimcets |
| <input type="checkbox"/> Kwakwala | <input type="checkbox"/> Tāltān |
| <input type="checkbox"/> Lingít | <input type="checkbox"/> Tse'khene |
| <input type="checkbox"/> Nedut'en / Witsuwit'en | <input type="checkbox"/> Tsilhqot'in |
| <input type="checkbox"/> Nisga'a | <input type="checkbox"/> Xaad Kil / Xaaydaa Kil |
| <input type="checkbox"/> Nteʔkepmxcín | <input type="checkbox"/> X̱enaksialakala / X̱a'islaakalay |

What community (or communities) will be served by this project?



Project Information

Cover Letter

Attach a cover letter to your application describing your proposed language project and its context within the community. You may wish to include information such as:

- Key activities and/ or strategies of the program,
- Ages and the number of participants in the program, and
- How the program fits within your community's long-term language revitalization plans.

Project Title

Project Status:

- This is a new project
- This is a continuation of a previous project
- This is a new project that is building on a previous project

If this project is a continuation of a previous project or one that is building on a previous project, describe the previous project that you are continuing or building on.

Include details of how this project will expand upon that previous work.

Project Summary

Provide a brief description of your project, including 3 – 5 key activities and expected outcomes. Point form is fine.

Project Context and Related Initiatives

Describe the context of your project and related initiatives. Please be sure to include:

- How does the project fit within your overall language revitalization plan?
- How does it support/how is it supported by other language projects in your community?
- How does it support/how is it supported by other language projects you are collaborating with?



Letter(s) of Support

Attach at least one signed and dated letter of support (from community, partners, participants, etc.).

Band Council Resolution / Letter of Approval

Attach one of the following:

- **For Bands:** a signed and dated Band Council Resolution or a signed and dated letter of approval from your Band Manager or Chief Councillor.
- **For Organizations/ Societies:** a signed and dated letter of approval from your Executive Director or General Manager.

Project Team and Participants

Provide the names of the project team and their project roles/ responsibilities, relevant skills/qualifications, and language level (if applicable).

Name	Project Role/ Responsibilities	Relevant Skills/ Qualifications	Language Level (If Applicable)



Who are the primary participants for this project? *Check all that apply.*

- Young children (age 5 and under)
- School-aged children (age 6–12)
- Youth (age 13–30)
- Adults (age 31–54)
- Elders (age 55+)

Provide the anticipated number of participants in your project.

# of young children (age 0–5)	
# of school-aged children (age 6–12)	
# of youth (age 13–30)	
# of adults (age 31+)	
# of Elders	
# of speakers, including Elders	
# of contractors	
# of cultural experts	
# of community leaders	
# of other participants/team members	
TOTAL # of anticipated participants	

Project Strategy

Which strategy best describes your project? *(Select up to 3)*

- Immersion Programming (Children or Adults)
- Traditional and Cultural Language Programming
- Documentation, Recording and Digitization
- Materials Development
- FirstVoices Development: Language Archiving Using FirstVoices Technology/FirstVoices Language Tutor
- Language Planning

Community Collaboration

Is this project in collaboration with other neighbouring communities, organizations, or language groups?

- Yes No

If you answered Yes above, which communities or organizations are actively involved in this project? Describe their involvement.



FPCC values collaboration among communities and organizations, but also acknowledges that collaboration is not always possible. If you answered *No* above, please explain why collaboration is not possible.

Workplan

Please provide a detailed work plan including (1) the key activities for your project, (2) what the outcomes will be, (3) they will happen, and (4) who will lead them.

1) Planned Activity	2) Expected Outcomes	3) Timeframe (e.g. Day/ week/month/ # of hours)	4) Lead Team Member(s)



Evaluation Plan

Describe your evaluation plan for the project.

How will you know if your project has been successful? If your project involves teaching language, how will you know how much was learned? If your project involves creating resources, how will you know if they are used? Who will be responsible for monitoring the project?

Language Teaching Methodology

If your project involves teaching language, please describe which method(s) of language training/instruction you will use.

Sharing, Mobilization and Continuation

If new materials or resources are being produced or revised, how will they be shared with your community?

Example: Materials printed and available for distribution, templates added to website, etc.

All materials created with FPCC funding should be distributed at no cost (perhaps with the exception of printing and mailing costs). If your organization is planning to charge for distribution of these materials, please explain. Accessibility to resources is a mandatory part of this project. How will you ensure materials and resources developed are fully accessible to the community?



If your project involves language teaching, what opportunities will participants have to continue their learning?

Key Strategies

What key strategies will you use? There are two types of strategies:

1. **Participatory** (Language learning activities) and,
2. **Resource Development** (archiving and documentation)

Identify which type of strategy or strategies you will use and complete the corresponding tables below. Projects may include a maximum of two strategies within or across these categories.

Participatory Activity 1 (IF APPLICABLE)	
If your project involves two participatory strategies, please use the second table as well.	
Type of Activity: (Classes, language nests, camps, mentor-apprentice, etc.)	
Language:	
Location of Activity: (Community centre, school, home, etc.)	
Level of Language Knowledge: (Beginner, intermediate, advanced)	
Duration: (Hours/ day and days/ week)	
Frequency:	



(Weekly, bi-weekly, monthly, etc.)	
For how long - max 39 weeks: (Number of weeks)	
Total to be delivered for the entire duration of the project: (Number of classes, nests, camps, sessions, etc.)	
Number of Participants per Session:	
Total number of hours/ classes per participant:	
What % of the activity will be delivered in the language (vs. in English): (e.g. 100% in the language = full immersion)	
Content: (Grammar, conversational skills, reading, writing, etc.)	
Delivered by whom: (Language instructor, Elder, etc.)	
Target Audience: (Children, youth, adults, etc.)	

Participatory Activity 2 (IF APPLICABLE)	
Type of Activity: (Classes, language nests, camps, mentor-apprentice, etc.)	
Language:	
Location of Activity: (Community centre, school, home, etc.)	
Level of Language Knowledge: (Beginner, intermediate, advanced)	
Duration: (Hours/ day and days/ week)	
Frequency: (Weekly, bi-weekly, monthly, etc.)	
For how long - max 39 weeks: (Number of weeks)	
Total to be delivered for the entire duration of the project: (Number of classes, nests, camps, sessions, etc.)	
Number of Participants per Session:	



Total number of hours/ classes per participant:	
What % of the activity will be delivered in the language (vs. in English): (e.g. 100% in the language = full immersion)	
Content: (Grammar, conversational skills, reading, writing, etc.)	
Delivered by whom: (Language instructor, Elder, etc.)	
Target Audience: (Children, youth, adults, etc.)	

Resource Development 1 (IF APPLICABLE)	
If your project involves two resource development strategies, please use the second table as well.	
Type of Resource: (Books, pamphlets, CD-DVD, website, APP, etc.)	
Language:	
Language Knowledge Level: (Beginner, intermediate, advanced)	
Content: (Story, dictionary, images with words, etc.)	
Based on existing resource? (Specify: transcribing stories, etc.)	
Total Number of Resources: (e.g. 5 different children's books)	
Total Number of Copies per Resource: (e.g. 50 copies per book)	
Total Number of Copies: (e.g. 5 books x 50 copies = 250 copies)	
Number of Pages OR Number of Words OR Number of Minutes: (of audio/ video resource)	
Illustrated? Number of Illustrations? To be done by whom?	
Developed by whom?	
Translated? Available in which language?	



Target Audience: (Youth, adults, etc.)	
How will the resource be used?	
Distribution Plan: (Internet/ online, email, mail, school, library, community centre, etc.)	

Resource Development 2 (IF APPLICABLE)	
Type of Resource: (Books, pamphlets, CD-DVD, website, APP, etc.)	
Language:	
Language Knowledge Level: (Beginner, intermediate, advanced)	
Content: (Story, dictionary, images with words, etc.)	
Based on existing resource? (Specify: transcribing stories, etc.)	
Total Number of Resources: (e.g. 5 different children's books)	
Total Number of Copies per Resource: (e.g. 50 copies per book)	
Total Number of Copies: (e.g. 5 books x 50 copies = 250 copies)	
Number of Pages OR Number of Words OR Number of Minutes: (of audio/ video resource)	
Illustrated? Number of Illustrations? To be done by whom?	
Developed by whom?	
Translated? Available in which language?	
Target Audience: (Youth, adults, etc.)	
How will the resource be used?	
Distribution Plan: (Internet/ online, email, mail, school, library, community centre, etc.)	



Budget

Using the following budget tables, provide details for all anticipated project expenses and sources of funding (where applicable). Add extra lines as needed.

Salaries/ Wages/ Professional Fees

Names and Roles	\$ Per Hour	# of Hours	Total Cost	Funds from Other Sources	Requested form FPCC

Honoraria

Description	Honorarium Amount	# of Honoraria	Total Cost	Funds from Other Sources	Requested form FPCC

Materials/ Supplies/ Publishing

Description of Expense	\$ Per Item	# of Items	Total Cost	Funds from Other Sources	Requested form FPCC



Equipment

Description of Expense	\$ Per Item	# of Items	Total Cost	Funds from Other Sources	Requested form FPCC

Food/Meetings

Description of Expense	\$ Per Item	# of Items	Total Cost	Funds from Other Sources	Requested form FPCC

Facilities

Description of Expense	\$ Per Item	# of Items	Total Cost	Funds from Other Sources	Requested form FPCC

Travel

Description of Expense	\$ Per Item	# of Items	Total Cost	Funds from Other Sources	Requested form FPCC



Administration

Names and Roles	\$ Per Hour	# of Hours	Total Cost	Funds from Other Sources	Requested from FPCC

BUDGET TOTAL

Expense Category	Total Cost	Funds from Other Sources	Requested from FPCC
Salaries			
Honoraria			
Materials			
Equipment			
Food			
Facilities			
Travel			
Administration			
TOTAL			

FINANCE PERSONNEL

Provide the contact information for the designated accountant/ bookkeeper/ person in charge of finances for this project.

Name (First and Last):
Title/ Position:
Phone:
Email:



Declaration and Signatures

Please read the following declaration and sign below to confirm your agreement.

I declare that:

1. The information in this application is accurate and complete.
2. The application is made on behalf of the organization named on page one with its full knowledge and consent.
3. If funding is provided, the organization will submit financial statements and activity reports as required by the Department of Canadian Heritage and the First Peoples' Cultural Council.
4. If funding is provided, the organization will submit an evaluation of the project funded, as required by the Department of Canadian Heritage and the First Peoples' Cultural Council.
5. If Funding is provided, the organization will seek prior approval of the First Peoples' Cultural Council for any changes made to the project proposal.
6. If funding is provided, the organization will publicly acknowledge funding and assistance by the First Peoples' Cultural Council and the Department of Canadian Heritage, where appropriate.

APPLICANT SIGNATURE

Name (First and Last):	
Signature:	Date:

SIGNING AUTHORITY SIGNATURE

Name (First and Last):	
Title/ Position:	
Email:	
Phone:	
Signature:	Date:



Feedback (Optional)

How did you hear about this funding call?

- | | | |
|---------------------------------------|------------------------------------|---|
| <input type="checkbox"/> FPCC Email | <input type="checkbox"/> Facebook | <input type="checkbox"/> Community Newsletter |
| <input type="checkbox"/> FPCC Website | <input type="checkbox"/> Twitter | <input type="checkbox"/> Word of Mouth |
| <input type="checkbox"/> FPCC Staff | <input type="checkbox"/> Instagram | <input type="checkbox"/> Other: |



Appendix A: Application Checklist

Only complete applications will be accepted Supporting documents will vary depending on your status as an applicant. Please use this list to indicate that your application is complete.

Application Form

- Application Form is complete (all sections are filled out) and signed by an authorized representative

Cover Letter

- A cover letter describing your proposed language project and its context within the community is attached

Community Support

- At least one dated and signed letter of support is attached (from community, partners, participants, etc.)

Governance Documentation

- For Bands:** Band Council Resolution (dated and signed) or a signed and dated letter of approval from the Band Manager or Chief Councillor is attached

OR

- For Societies/ Organizations:** a signed and dated letter of approval from the Executive Director or General Manager

Submit by Deadline

- Mail or courier your completed application to First Peoples' Cultural Council by January 31, 2020. Items must be postmarked by the submission deadline. (Alternatively, submit your proposal online via the FPCC Grant Portal: <http://fpcc.ca/login.>)

Attn: Indigenous Languages Grants
First Peoples' Cultural Council
1A Boat Ramp Road
Brentwood Bay, BC V8M 1N9