



Department of Intergovernmental Affairs

**CANADA-NEW BRUNSWICK AGREEMENT ON THE PROVISION
OF FRENCH-LANGUAGE SERVICES**

SUPPORT FOR TRANSLATION AND INTERPRETATION PROGRAM

APPLICATION FORM
Fiscal year April 1st 20__ to March 31 20 __

PART A – INFORMATION ABOUT THE ORGANIZATION

1. General Information

Name of Organization:

Mailing Address:

Telephone Number:

Web Site Address:

Head Office Address (if different from Mailing Address):

2. Person designated to act on behalf of the organization / Contact Person

Name:

Telephone Number:

E-mail address:

Language of Communication: French English

3. Information regarding the organization's structure and activities

Vocation:

- Social
- Community

Status: (Please provide a copy of the organization's constitution and by-laws / letters patent)

- Non-profit organization registration n^o: _____

Mandate of organization

Does the organization provide its services in both official languages?

- Always
- Sometimes
- Never

PART B – PROJECT INFORMATION

Type of Project:

- Event (Interpretation (and document translation))
- Translation services only

Project Title:

Project Description:

Anticipated Results:

Scope and visibility of project:

Number of translated copies available for the public:	
Target Audience :	
Members of the organization	Number:
General public	Number:
Other (specify)	Number:

Signature (Applicant)

Date

For a list of translators and interpreters in New Brunswick, consult the website for the Corporation of Translators, Terminologists and Interpreters of New Brunswick at www.ctinb.nb.ca

Please return completed application and required supporting documentation to:

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

You may also reach us at:

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 E-mail: PSLO-POLS@gnb.ca