

# Department of Post-Secondary Education, Training and Labour

# Foreign Qualification Recognition Funding Application Form

Please review the Foreign Qualification Funding Guidelines to ensure that your project(s) meets all the necessary requirements.

1. Organization information

Name of Organization:					
Contact Person:			Title/Position:		
Address:					
Website:			Telephone Number:		
Fax Number:			Email Address		
Date of Application:			Is the organization incorporated?	Yes Incorporation No.:  No	
Have you submitted an application to the Department before?		□ Yes □ No	If yes, please specify: The last year you applied: Amount of funding granted, if any: 		

#### 2. Organizational Profile:

(Please provide a brief profile of your organization.)					

3. Project Title

Revised 2015-03-31

4. Duration of project, including start date and end date of project:

#### 5. Description of Project

(Please outline the proposed project or program including: geographic area served; target clientele; plan to promote the program and/or recruit clients (if applicable); description of activities, partners and their roles; and any tools or resources that are expected to be created over the course of the project.

## 6. Need for Project:

(Please clearly outline the need for this project including how the need was identified, and any supporting data, research or statistical information.)

7. How will the project meet the stated needs?

(Explain how the project meets the needs outlined in section 6. Explain why this project or programming will not duplicate similar programs or services already available.)

8. Scope of Project:

(Please explain whether the scope of the project will be local, regional, or provincial.)

## 9. Objectives

(Please indicate clearly-defined objectives that will be met at the end of the project. Objectives must be measurable and be realistic given the organization's resources and experience and the proposed budget and timeline.)

#### 10. Relevance to FQR goals and objectives

(Please provide a clear explanation of how the project objectives or capacity-building goals advance the mission of the Pan-Canadian Framework of "*a fair and competitive labour market environment where immigrants have the opportunity to fully use their education, skills and work experience for their benefit and for Canada's collective prosperity.*" For qualifying activities please refer to the Foreign Qualification Recognition Funding Guidelines )

11. Mutual benefits of the project:

(Please outline how immigrants and the established community will each benefit from the implementation of the programming.)

## 12. Integration benefits:

(Please explain how this project will encourage efforts to involve newcomers to participate in the social and economic life of their new communities.)

## 13. Action Plan with timelines:

(Please list a clear action plan for carrying out the activities related to the project, including target dates for key activities or project milestones.)

# 14. Anticipated Outcomes

(Provide a list of expected outcomes demonstrating how the project will produce measurable results.)

## 15. Evaluation

(The evaluation plan is preferably based on a result-based management model.)

#### 16. Budget

(Please insert a budget here in the following format and place items under the appropriate funding							
categories. The budget must reflect any other funding that is being sought for the project. Also,							
include a <u>contact name and phone number</u> for any additional funders you may be approaching.)							
Categories	Partner	Amount requested	<u>Total</u>	<u>Notes</u>			
	contribution share	of the Department	<u>Costs</u>				
	if applicable						
	and Mandatory Empl	loyment Related Costs	(MERCs)				
Salary							
Benefit							
	ad (Activity Costs)						
Supplies and							
resources	ļ						
Facilities and							
equipment	<u> </u>						
Travel							
Other <sup>2</sup>							
Administration (	Costs <sup>3</sup>			•			
Salaries							
Benefits							
Other <sup>4</sup>							

<sup>&</sup>lt;sup>1</sup> Salaries of staff involved in direct delivery of the program or project. Contract positions may be included under this

heading <sup>2</sup> Includes items that do not fit in other categories, such as registration fees for a workshop conference related to the project, or other miscellaneous expenses <sup>3</sup> Up to 15 per cent of the total program budget can be in the category of administration costs <sup>4</sup> Bank charges, liability or other insurance, annual audit, bookkeeping, etc

#### 17. Declaration

I have completed and duly signed this **Post-Secondary Education, Training and Labour Foreign Qualification Funding Application Form**. I declare that the information in this application and all attachments is accurate and complete, to the best of my knowledge.

I recognize that applications are approved subject to availability of funds and that, beyond the provision of a grant, the Province of New Brunswick has no further commitment to the applicant. The Province will not be held responsible for the completion of an activity.

I agree to acknowledge the financial participation of the Province of New Brunswick in all publicity related to the activities of the proposed project.

I further declare that the organization will provide financial and final reports to the Foreign Qualification Recognition Team by the end of March of the current fiscal year.

I certify that I am authorized by the above-named organization to sign official documents.

Name: \_\_\_\_\_\_ Title/Position: \_\_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

## PLEASE SEND THIS COMPLETED FORM AND OTHER DOCUMENTATION TO:

Department of Post-Secondary Education, Training and Labour Beaverbrook Building Room: 500 Floor: 5 PO Box 6000 Fredericton NB E3B 5H1

Tel: 506-453-3981 Fax: 506-444-6729 Email: <u>immigration@gnb.ca</u> Website: www.gnb.ca/immigration

#### APPLICANT CHECK LIST:

Completed, dated application.

Complete itemized budget

Copy of the constitution or letters of incorporation (if applicable).

Attach other documents expressing community support or commitment (if applicable).

Any other applicable attached documentation.

# Department of Post-Secondary Education, Training and Labour

# **Report Foreign Qualification Recognition Funding**

#### **Project Information:**

Name or title of project: Duration of project: Amount of funding received

# **Applicant Information:** Name of Organization:

Name of Organization: Contact Person: Title: Telephone: Email:

Activities accomplished to date

Activities planned for next quarter

# Budget

<u>Categories</u>	Partner contribution share if applicable	Amount requested of the Department	<u>Total</u> <u>Costs</u>	Amount Spent	<u>Remainder</u> <u>Funds</u>	<u>Notes</u>	
Wages, Bene	Wages, Benefits and Mandatory Employment Related Costs (MERCs) <sup>5</sup>						
Salary							
Benefit							
Project Over	head (Activity Costs)						
Supplies and resources							
Facilities and equipment							
Travel							
Other <sup>6</sup>							
Administration Costs <sup>7</sup>							
Salaries							
Benefits							
Other <sup>8</sup>							

<sup>&</sup>lt;sup>5</sup> Salaries of staff involved in direct delivery of the program or project. Contract positions may be included under this heading

 <sup>&</sup>lt;sup>6</sup> Includes items that do not fit in other categories, such as registration fees for a workshop conference related to the project, or other miscellaneous expenses
<sup>7</sup> Up to 15 per cent of the total program budget can be in the category of administration costs
<sup>8</sup> Bank charges, liability or other insurance, annual audit, bookkeeping, etc