



<i>Financial Administration Act, R.S.P.E.I 1988, Cap. F-9</i>	Program	Finance
	Subject	Funding to Community Organizations
Effective Date: February 5, 2013		Authorized by: Teresa Hennebery
Revised Date: September 22, 2016		Deputy Minister

1.0 PURPOSE

1.1 To outline the Department's process for funding approved community organizations.

2.0 POLICY STATEMENT

2.1 The Department contributes to the well being of individuals, families and communities by working with community organizations to promote the development of healthy, self-reliant individuals as well as supporting and protecting vulnerable members of the Island community.

2.2 The Department may approve a community organization to be eligible for funding if the community organization supports the mandate and policy direction of the Department, provides services to Islanders, and the Department determines the services are required and are best provided through that organization.

3.0 PROCEDURE STATEMENT

3.1 An approved community organization seeking funding is required to complete a Budget Submission Template.

The template contains:

- Organization Certification
- Organizational Information
- Board of Directors
- Program Description
- Financial Information
- Supplementary Information

The Department will provide a Budget Submission Template to approved community organizations by October of each year.

- 3.2 Community organizations must reapply for funding each year. Community organizations must submit their completed Budget Submission Template with their budget request each year by the end of October to be considered for funding for the upcoming fiscal year commencing April 1.
- 3.3 The completed Budget Submission Template is reviewed and an assessment is made of proposed work and grant request to determine if it continues to align with the mandate, strategic direction, and legislative direction of the Department.
- 3.4 Funding requests are evaluated via information gained from the community organization's prior years and current year budget submissions and most recent audited financial statements. Budget submissions and financial statements are used to determine and analyze:
- Current and debt ratios;
 - Surplus/(deficit) and accumulated surplus/(deficit);
 - Operating reserve(s);
 - Reliance on Departmental operating grant;
 - Spending on wages and benefits;
 - Variances in prior year budget figures and actual spending; and
 - Other relevant factors.
- 3.5 Approved funding amounts may be less than amounts requested. The Department has finite capacity to fund community organizations, and must prioritize and distribute available funding prudently.
- 3.6 If funding is approved, the community organization must enter into a contract with the Government of Prince Edward Island. The contract outlines obligations of the community organization and the Department, to include:
- a description of "the work";
 - established goals and objectives;
 - established time lines for reporting results;
 - verification of required insurance coverage; and
 - verification of Workers Compensation coverage
- 3.7 Contracts are for one year. Receiving funding in one year does not guarantee funding in future years.

4.0 REFERENCE

Treasury Board Policy and Procedures Manual, Section 13 - Contract Services, Conditional Grants and Funding Agreements

5.0 ATTACHMENT

Budget Submission Template

HISTORY:

September 22, 2016 – Changed language from NGO to community organization, added Budget Submission Template.

Department of Family and Human Services

COMMUNITY PARTNER ORGANIZATION

BUDGET SUBMISSION TEMPLATE - 2016/2017

ORGANIZATION NAME: _____

DATE DUE: _____

For Department Use Only	
Date Received:	_____
Entered into Database:	_____

Instructions

- Section I - Certification** The President or Chair of the Community Partner Organization must fill in and sign Section I. If the Community Partner Organization does not have electronic signature capabilities, the President or Chair must print Section I, sign, and fax it to the Department of Family and Human Services at (902) 894-0242.
- Section II - Organizational Information** Provide information requested within Section II. If information has already been inputted by the Department, update or make corrections, if necessary.
- Section III - Board of Directors** Provide information requested within Section III. If information has already been inputted by the Department, update or make corrections, if necessary.
- Section IV - Program Description** Provide information requested within Section IV. If information has already been inputted by the Department, update or make corrections, if necessary.
- Section V - Financial Information** The Community Partner Organization's Latest Audited Financial Statement information as well as information relating to its Comparable Year Budget has been inputted by the Department. If the audited financial statement year (i.e. 2014) has not been provided, input in grey cell. Provide an explanation for all variances that are greater than 10% or \$5,000. Variances are calculated automatically.
- Financial information relating to the Community Partner Organization's Prior Year Budget has been inputted by the Department. Input the Community Partner Organization's Current Year Budget. Provide an explanation for all variances that are greater than 10% or \$5,000. Variances are calculated automatically.
- Section VI - Funding Requested** Provide information requested within Section VI. If information has already been inputted by the Department, update or make corrections, if necessary.
- Section VII - Supplementary Information** Provide any supplementary information that may help the Department in assessing the Community Partner Organization's budget request.

Section I - Certification

I _____ President/Chair of _____
Name Community Partner Organization name

confirm that the requested operating grant for the year April 1, 2016 to March 31, 2017 is
MM/DD/YY to MM/DD/YY

\$ _____
Amount

Signed Date

(Note: If you do not have electronic signature capabilities, please print Section I, sign and fax to the Department of Family and Human Services at (902) 894-0242.)

Section II - Organizational Information

Provide Corrections (if necessary)

Legal Name :	_____	_____
Address:	_____	_____
	_____	_____
	_____	_____
Contact:	_____	_____
Telephone Number:	_____	_____
Fax Number:	_____	_____
E-mail Address:	_____	_____

Section III - Board of Directors

Provide Corrections (if necessary)

President:	_____	_____
Vice-President:	_____	_____
Treasurer:	_____	_____
Director:	_____	_____
Director:	_____	_____
Director:	_____	_____
Director:	_____	_____
Director:	_____	_____
Director:	_____	_____
Director:	_____	_____
Director:	_____	_____
Director:	_____	_____
Director:	_____	_____
Director:	_____	_____
Director:	_____	_____
Director:	_____	_____

Section IV - Program Description

Section V - Financial Information	Compare "Actual" to "Budget"						Compare "Budget" to "Budget"			
	Audited Financial Statements Yr. Ended	Comparable Budget Year	Variance \$	Variance %	Explanation for Variances Greater Than 10% or \$5,000	Current Year Budget	New Year Budget	Variance \$	Variance %	
Revenues	Revenues: Include all revenue generated by the Community Partner Organization including donations, fundraising, rental, other provincial/federal government funding, etc.					Revenues (include all revenue generated by the Community Partner Organization including donations, fundraising, rental, other provincial/federal government funding, etc.)				
			-	#DIV/0!				-	#DIV/0!	
			-	#DIV/0!				-	#DIV/0!	
			-	#DIV/0!				-	#DIV/0!	
			-	#DIV/0!				-	#DIV/0!	
Total Revenue	\$ -	\$ -				\$ -	\$ -			
Expenses	Expenses: Include all expenses incurred by the Community Partner Organization including salaries & benefits, heating fuel, electricity, insurance, property taxes, travel, professional services, etc.					Expenses: Include all expenses incurred by the Community Partner Organization including salaries & benefits, heating fuel, electricity, insurance, property taxes, travel, professional services, etc.				
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Total Expenses	\$ -	\$ -				\$ -	\$ -			
Surplus/(Deficit)	\$ -	\$ -				\$ -	\$ -			

Section VI - Funding Requested

Current budget year Operating Grant requested from the Department of Family and Human Services	\$ -
Prior budget year Operating Grant received from the Department of Family and Human Services (as per contract)	_____
Prior budget year Operating Grant requested by Community Partner Organization from the Department of Family and Human Services	_____
Requested Increase to Operating Grant	\$ -

(Note, the above request for funding applies to the Department of Family and Human Services Operating Grant. Funding requests for any other government programs are not to be included within Section VI of this submission)

Section VII - Supplementary Information

Please provide any supplementary information that will assist in assessing your submission: