FCSS application questions and information 2026

Please complete the application by end of day October 16, 2025. If your organization is applying for more than $10,000. All fields must be complete with information requested, otherwise your application will be deemed incomplete and will not advance for consideration. If your organization is applying for $10,000 or less, please contact the grant administrator at amackinnon@stalbert.ca to schedule and application interview.

Please note, you cannot save and return to this form later, it must be completed in one session. Please use the ‘Application Questions and Information’ word document to record your text answers in advance and copy and paste them into this form once you are ready to submit. Information needed to guide you through this application is provided in the Funding Guide, and the Application Questions and Information documents. Please review these documents prior to submitting your online application.

**ORGANIZATION MANDATE AND BACKGROUND**

1. Organization legal name (required).
2. What is your organization’s mission and vision (required)?
3. Has your organization been incorporated for over 1 year? (required) (multiple choice)
4. Organization legal address (required)
5. Organization physical address (if different than legal address) (optional)
	* *If your organization does not have a physical address, please indicate this, or leave it blank.*
6. Organization phone number (required)
7. Organization email address (required)
8. Organization website (required)
9. Please list all organizational social media links/handles (required)
10. Application contact name, and phone number (required)
11. Application contact email (required)
12. Organization fiscal year end date (required)
13. Date/month of Annual General Meeting (required)

**ORGANIZATION GOVERNANCE**

1. Is the board of directors aware and supportive of the application? (required) (multiple choice)
2. Does the board of directors participate in annual board development? (required) (multiple choice)
3. If applicable, describe training the board participated in within the past year. (max 1000 characters)
4. Which policies, bylaws and up to date governing documents does the organization use to govern its work? Please select all that apply. (Checkboxes will be available for you to select the policies your organization has). (required)
	* Conflict of interest policy (required)
	* Confidentiality policy (required)
	* Nepotism policy (required)
	* Code of Conduct (required)
	* Limited terms of office for board directors (required)
	* Performance review of the chair of the board
	* Performance review of the board of directors
	* Performance review of the senior staff person
	* Staff recruitment, selection, and dismissal policy
	* Inclusion, Diversity, Equity, and Accessibility and/or Anti-Racism policy or practice
	* Expenditures policies
	* Surpluses (annual) policy
	* Reserve fund policy
	* Bylaw review policy/bylaw
	* Policy review policy/bylaw
	* HR policies
	* Board Liability/Insurance provided to board members
	* Complaints/dispute resolution policy
	* Employee health and safety policy
	* Human rights commitment/policy
	* Risk management plan/policy
	* Succession plan/senior staff coverage plan/policy
	* Up to date strategic plan
	* Volunteer onboarding process
	* Volunteer manual
	* Volunteer appreciation plan/process
	* Up to date job descriptions for all staff and board director roles
	* Up to date volunteer role descriptions
5. If your organization has Inclusion, Diversity, Equity and Accessibility (IDEA) and/or Anti-Racism policies or practices, please explain how they link to your mission and vision, and contribute to your organization’s work. (max 2000 characters)
	* *Do organization staff and/or board participate in regular professional development in this area? If so, please list training taken in the past year.*
	* *Does the organization actively seek out working with diverse populations? If so, how?*

**PROGRAM DETAILS**

1. Program name. (required)
2. Who is the program’s primary audience? (required) (max 250 characters)
3. How many unique participants/clients will be served? (required) (max 250 characters)
4. What proportion of participants/clients served are St. Albert residents? (required) (max 500 characters)
	* *St. Albert FCSS funding can only be spent on St. Albert residents, though programs may include those from outside St. Albert. If programs include non St. Albert residents, funding requests should specify other funding received for non St. Albert residents, OR the funding request should be reduced to reflect the percentage that covers St. Albert residents.*
5. Please provide an overview, and details of the program. In your answer, please include: when (days/times) the program will run, how often the program will occur, the location of the program, how the program will run and what participants/clients will experience. (required) (max 4000 characters)
6. What evidence exists that supports the program will effectively address the identified social need/gap? (required) (max 3000 characters)
7. What makes this program unique or complimentary to other programs/projects in the community? (required) (max 3000 characters)
	* *For example, perhaps your program is the only program in the community addressing a particular need. If so, please state this.*
	* *Or perhaps your program is not the only program addressing a particular need, however, other programs serve a different age group, demographic, or serve them in a different way. For example, another program provides mental health services to children and youth, however they serve ages 12-18, and your program serves children ages 5-11. Or perhaps your program is offered in the evenings, and the other program provides day programming.*
8. Please explain how the program is inclusive and accessible. (required) (max 2000 characters)
9. Please list the program/project partners, and their contributions to the initiative. (required) (max 4000 characters).
	* *Please do not list all organizational partners, only the partners involved in the program/project you are applying for.*
	* *Be sure to describe how each partner will be involved in the program/project, what they are bringing to the table. For example, will they be referring participants to the program? Are they providing financial assistance? Are they providing in-kind assistance (such as a facility, volunteers, staff, materials, etc.)? Something else?*
10. At which community working groups, tables, committees, etc. do the association regularly participate? (required) (multiple choice)

**ELIGIBILITY**

1. Please explain how the program/project fits with primary prevention. (required) (max 2500 characters)
	* *Primary prevention (please see Funding Guide for more information)*
		1. *Addresses root causes of social issues with focus on general population or specific populations.*
		2. *Promotes protective factors in the physical and social environment.*
		3. *Can include awareness programs, enhancing connections among community organizations and promoting community volunteerism.*
2. Indicate which Provincial Prevention Strategy best applies to the program/project. (multiple choice) (required)
3. Indicate which Provincial Prevention Priority best applies to the program/project. (multiple choice) (required)
4. Indicate which focus area from St. Albert’s Community Social Roadmap, your program/project best aligns with. (multiple choice) (required)

**PROGRAM OUTCOMES, INDICATORS, AND MEASUREMENT**

1. How does your organization define success for the program/project? (required)
	* *Please list what your organization is trying to achieve with the program/project. If this is an ongoing project, please outline if the definition of success has changed over time, or if it will be different this year than in previous years.*
2. How do the recipients of the program/project define success? If this is different than how your organization defines success, please explain. (required)
	* *No need to add much detail if recipients define success the same way the organization does. You can simply say this.*
	* *If it is different, please explain why it is different.*
3. Describe the program/project measurement tools that will be used to collect data and measure success. Please also explain how the results will be used. (required) (max 2500 characters)
* *Measurement tools can be as simple as tracking attendance or compliance, participants completing a survey, or receiving verbal feedback. It can also be more focused such as goal setting at the beginning, with check ins midway and at the end to determine goal progression. The measurement tools used will depend on the program, and the information you want to collect to evaluate program success and make improvements in the future.*
* *Be sure to explain when each of the measurement tools will be used. For example, taking attendance at each session/event, completion of surveys at the end of the program/project, or collecting verbal feedback midway through the program/project through informal conversations.*
* *Also include how the results will be used. For example, will tracking attendance be used to gauge interest, or determine if the program can accommodate more or less participants next time? Will survey data and informal conversations be used to make improvements to the program?*
1. Describe how residents will be informed of the program, and how they will access the program (referral/intake process if applicable). (required)
	* *Ensuring those that can benefit from programming are aware it exists is important. List all the ways your program will be promoted, for example newsletter, website, local program guides, brochures/posters in strategic locations, specific social media sites (Facebook, Twitter, Instagram, LinkedIn, etc.), word of mouth, etc. Also explain the modes that have been most successful for you in the past if this is an ongoing program, and any other relevant information such as:*
		1. *Social media stats such as followers and/or engagement*
		2. *Website stats such as number of visitors per month, number of unique visitors, new visitors, etc.*
		3. *Newsletter stats such as open rate, click through rate, etc.*
	* *If your program marketing does not align with your target market, please explain. For example, if your target market is teens, and you do not plan to market on social media, explain. If your target market is seniors and you plan to market exclusively on social media, please explain.*
	* *Also explain how residents will access the program. Is there a referral or intake process? If so, what does this look like. Can a person self referral or does the referral need to come from a partnering organization? What does the intake process involve? If they need to complete a form, how would a resident access and complete the form? How long is the wait to be admitted to the program?*
2. 211 is an important resource and is one of the main ways residents learn about resources in our community. If your organization is eligible to promote your programs and services through 211, do you use the service, and if so, how do you keep information up to date? (max 2500 characters)
	* *If your organization does not qualify to promote through 211, please indicate this.*

**PROGRAM TEAM CAPACITY, EXPERTISE AND EXPERIENCE**

1. Describe your organization’s experience as it relates to the program being proposed. (required) (max 4000 characters)
	* *Have you run the program before or is this the first time? If it’s the first time, have you run anything similar in the past? Will the staff/volunteers running the program/project have specific expertise in this area?*
2. How are program staff supported in their roles (training/professional development, supervision/mentorship, communities of practice, etc.)? (required) (max 4000 characters)

**PROGRAM BUDGET, AND ORGANIZATION FINANCIAL CAPACITY**

1. Please list the amount of funding requested. (required)
2. Please list the number of years funding is being requested. Please ensure your organization meets the criteria, as per the Funding Guide, for the requested funding years. (required) (multiple choice)
3. Please outline the program’s cost structure for participants, including any registration or membership fees and whether a sliding fee scale applies. If this program’s fees differ from your other offerings, explain how you will communicate this difference to your primary audience. (required) (max 4000 characters)
	* *For example, your organization charges membership for all other programs other than this one, or, this program is on a sliding scale, but none of your other programs. How is this communicated to the primary audience for the program?*
4. If the program/project does not receive FCSS Program Funding, will some or part of the program be able to proceed? Please explain. (required) (max 2500 characters)
5. If your organization received FCSS funding in 2025, do you anticipate having unspent funds at December 31, 2025? If so, please explain the plan for utilizing the unspent funds after December 31, 2025. (required) (max 2500 characters)
6. If your organization has a surplus in your financial statements for the most recent year, please explain the need for outside funding for this program/project. (max 2500 characters)
7. How does your organization monitor, account for and report on external funding (grants)? (required) (max 1000 characters)
8. Does your organization rely on external expertise, such as accredited accountants, auditors or bookkeeper to monitor and advise on internal financial controls and systems, and to conduct financial audits or reviews? Please explain. (required) (max 1500 characters)