



REGIONAL DISTRICT OF BULKLEY-NECHAKO

**RURAL DIRECTORS COMMITTEE
SUPPLEMENTARY AGENDA**

Thursday, April 4, 2019

PAGE NO.

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REPORT

**Wendy Wainwright, Executive Assistant
–Granisle Public Library – Request for Grant
in Aid – Electoral Area “G” (Houston Rural)**

ACTION

**Recommendation
(Page 2)**

NEW BUSINESS

ADJOURNMENT



REGIONAL DISTRICT OF BULKLEY-NECHAKO

SUPPLEMENTARY MEMORANDUM

TO: Chair Newell and Rural Directors Committee

**FROM: Wendy Wainwright
Executive Assistant**

DATE: April 3, 2019

SUBJECT: Granisle Public Library – Request for Grant in Aid – Electoral Area “G” (Houston Rural)

Attached is a request for Grant in Aid monies from the Granisle Public Library.

The Society is seeking \$2,500 from Electoral Area “G” (Houston Rural) grant in aid monies for costs associated with technology and database instruction.

Director Newell has indicated that he is supportive of this project.

RECOMMENDATION: (All/Directors/Majority)

“That the Rural Directors Committee recommend to the Regional District of Bulkley-Nechako Board of Directors that the Granisle Public Library be given \$2,500 grant in aid monies from Electoral Area “G” (Houston Rural) for costs associated with technology and database instruction.”

Wendy Wainwright

From: Wendy Wainwright
Sent: Wednesday, April 3, 2019 9:17 AM
To: Wendy Wainwright
Subject: FW: New submission from "Grant in Aid Application"!

From: Regional District of Bulkley-Nechako <inquiries@rdbn.bc.ca>
Sent: April 1, 2019 11:41 AM
To: Cheryl Anderson <cheryl.anderson@rdbn.bc.ca>
Subject: New submission from "Grant in Aid Application"!

<image002.png>

REGIONAL DISTRICT OF BULKLEY-NECHAKO
ELECTORAL AREA GRANT IN AID APPLICATION

APPLICATION SUBMITTED BY:

Granisle Public Library

Mailing Address:

*PO Box 550, #2 Village Square, McDonald
Ave*

Email:

library@granisle.net

Contact Person:

*Lisa Rees ph:250-697-2713, fax:888-
335-4682*

APPLICATION SUMMARY

Project or purpose for which you require assistance:

To assist with our technology and database expenses/instruction

Amount Requested:

\$2,500

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To the best of my knowledge, all of the information that is provided in this application is true and correct. Furthermore, I hereby certify that this application for assistance is NOT being made on behalf of an individual, industry, commercial or business undertaking.

Yes

(signature of authorized signatory) (title)

Signature of Electoral Area Director

Amount Approved: _____

Date: _____

APPLICATION PROFILE

Is your organization voluntary and non-profit?:

Yes

Please describe the services/benefits that your organization provides to the community. Are these services/benefits available to the community from another organization or agency?

We are a resource for educational and recreational reading materials and we foster a desire for lifelong learning through school visits and technology instruction. These services are not offered by anyone else in our area

Describe the geographic area that receives services or benefits from your organization.

Village of Granisle through to Topley Landing (area G)

Please detail any remuneration paid, or funds otherwise made available to members, officers, etc. of your organization.:

Paid part-time staff

Please comment on the number of members/volunteers in your organization and how long your organization has been in operation.:

*Three part-time staff
Nine Volunteer Board Members.
Incorporated in 1974*

PROJECT PROPOSAL PROFILE

RDBN Assistance Requested:

*capital project and/or equipment
other purpose*

Other Assistance Requested:

*Computer upgrading and assisting
with coverage of services to our
regional district library members*

Please describe the proposal for which you are requesting assistance. If you are applying for an exemption from fees and/or charges or other consideration, please provide details or your request here. Attach additional information if required:

*Village of Granisle funds over 80% of our current budget which benefits our village residents
as well as our Rural residents*

Describe how this proposal will benefit the community:

I will assist with budget costs of services provided by our Village

FUNDING AND FINANCIAL INFORMATION

files Submitted:

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Have you applied for a grant/funding from other source(s)?:

No

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If not, please comment.:

Name of Grant or Funding Agency1:

Amount Applied for 1:

Status of Grant Application1:

Name of Grant or Funding Agency2:

Amount Applied for2:

Status of Grant Application2:

Name of Grant or Funding Agency3:

Amount Applied for3:

Status of Grant Application3:

Name of Grant or Funding Agency4:

Amount Applied for4:

Status of Grant Application4:

Have you received assistance before from us.

Yes

Year, Amount and Purpose for assistance

*2017 \$2500, to assist with technolog
and database instruction.*

Year, Amount and Purpose for assistance

*2015, \$2500, to assist with
technology and database
instruction.*

Does your organization:

Offer direct financial assistance to individuals or families?:

Duplicate services that fall within the mandate of either:

a senior government or a local service agency?:

Provide an opportunity for individuals to make direct

Yes

contributions?:

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OR, is your organization: Part of a provincial or national fund raising campaign?:

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