

GRANT APPLICATION ~ Delta Youth Initiated Projects

Please note DYSL will not provide Secondary School YIP funding without a completed grant application.

This form must be completed by students & submitted within (a minimum) 4 weeks to the start of the project.

Name of School:		Class:			
Name of Project:		Number of			
		students served by this project:			
Location of Project:		Date of Project:			
Name of Teacher:		School Phone			
Student Contest		Number:			
Student Contact email or phone:		Teachers endorsement			
_		signature:			
Total Funds Requested:		Application completed by:			
What if any mediums	OPhotos ODVD OSocial Media				
will you use to record your project:	If any of the above are used, we strongly recommend you have a photo release signed (16				
	& over do not require parent signature). DYSL can provide this to you.				
Applications Accepted By:					
EMAIL:	L:		Mail:		
EXECUTIVEDIRECTOR@DYSLSOCIETY.COM		Kim Davidson, Executive Director			
Subject Line: YIP Grant Rrequest		Delta Youth Support Link Society			
Attention: Kim Davidson, Re: YIP Project		#101 – 1524 56 th Street			
		Delta, BC V4L 2A8			
Projects Funded: Youth leadership groups promoting school connectedness & belonging through events and activities. Projects promoting mental health wellness and acceptance will receive priority funding.					
PROJECT DESCRIPTION:					
GOALS OF THE PROJECT:					
Internal Use Reviewed By:		Internal Use Date:			



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Evaluation of Success of Project: (Post-Project)

OF YOUTH PARTICIPATING IN PLANNING, IMPLEMENTATION, EXECUTION, EVALUATION?

OF YOUTH ATTENDING EVENT &/OR PARTICIPATING IN ACTIVITIES?

PROJECT OUTCOMES? HOW DID YOUR SCHOOL COMMUNITY BENEFIT FROM YOUR DYSL YIP FUNDED PROJECT?

Please include social media links, DVD's, Photos if available.

Submitted By:		Date:	
Permission to use photos on DYSL website	Please circle one: YES NO	Photo Release Waivers Signed	Please circle one: YES NO