## Métis Veterans Legacy Program (MVLP) Commemoration Program

# EXPRESSION OF INTEREST





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## About the program

Thank you for your interest in the Métis Veterans Legacy Program (MVLP)

The MVLP has two objectives:

- To acknowledge, through an individual *Recognition Payment*, the pre- and post-war experiences of Second World War (WWII) Métis Veterans which may have negatively impacted their demobilization success; and
- To deliver continued support through the *Commemoration Program* to our Métis Veterans, for their sacrifices and contributions, by promoting awareness and appreciation across the Métis Nation and all of Canada.

#### ABOUT THE COMMEMORATION PROGRAM

The sacrifices and contributions Second World War Métis Veterans made to ensure peace and prosperity for all remain largely unknown throughout Canada. The Commemoration Program intends to honour, respect, and preserve their legacy by supporting and fostering awareness initiatives focused on Second World War Métis Veterans amongst the Métis Nation and the Canadian public.

Initiatives approved for funding must associate with one of the four pillars which have been established as primary stakeholders of the overall program:

- 1) Métis Veterans & Families
- 2) Recognized Métis Nation Governments, Organizations, & Institutes
- 3) The National Métis Veterans Association
- 4) The Canadian Public

#### **ELIGIBLE RECIPIENTS**

Those eligible to apply for funding include:

- Métis Nation citizens
- Recognized Métis Nation Government, organizations and institutes
- Canadian citizens
- Canadian organizations and institutes



## Before you begin

- Ensure you have read and understand all eligibility and project requirements.
- Review all questions before answering them to make sure you can provide all the information required.
- Review the MVLP Commemoration Program Procedure chart (Appendix A) to make sure you understand the approval and implementation processes and procedures.

## Purpose of this process

Our evaluation team will review your expression of interest to assess how your proposed project aligns with the goals and desired outcomes of the MVLP program.

This form includes a series of questions asking you to describe your proposed project. Please answer all of the questions. Be as concise as possible with your responses, but don't leave out any important information.

You must complete this form in full. Your expression of interest may be refused if it has errors or information is missing.

### How we use the information you provide

By completing this form, you are providing information voluntarily.

We will use this information to assess your submission.

## Protection of personal information

Your personal information will be managed in accordance with the *Privacy Act* and other relevant laws. You have the right to:

- access your personal information
- ask for corrections if you think there is an error or an omission



## **Expression of Interest Form**

Please answer all the questions in this Expression of Interest Form.

#### **PART 1: APPLICANT**

#### A. Information about Applicant

1. Legal name of organization or individual. This is usually the name on file with the Canada Revenue Agency or a provincial or territorial equivalent. It may also appear on funding cheques.

Click here to insert your answer.

2.	. Applicant type. Choose the type that best describes you		
		Individual	
		□ Indigenous people	
		☐ Métis Nation citizens	
		□Non-Indigenous	
		Organizational Applicant □ Indigenous Government, organizations, and institutes	
		$\square$ Recognized Métis Nation Government, organizations, and	
	inst	itutes	
		$\hfill\square$ Non- Indigenous Government, organizations, and institutes	
		Organization Type  — research or educational institution (such as a university)	
		□ not-for-profit organization	
		$\square$ Others, please specify	
	Clic	k here to insert your answer.	
3.		ss of Applicant. Give a complete street address and include the city,	

province, and postal code. Use a format recognized by Canada Post. Visit the <u>Canada Post website</u> for more information.

Click here to insert your answer.



#### **B.** Contact information

Primary contact. This is the person responsible for completing this form. All correspondence regarding this expression of interest will be sent to this person.

#### 1. First and last name

Click here to insert your answer.

#### 2. Position title

Click here to insert your answer.

#### 3. Telephone number

Click here to insert your answer.

#### 4. Email address

Click here to insert your answer.

	5.	Preferred	language f	or written	communication.	Choose o	ne.
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☐ English
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	French
$\Box$	richt

#### 6. Preferred language for spoken communication. Choose one.

	Eng	glish
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□ French

#### PART 2: PROJECT INFORMATION

Please consult the program guidelines to help you complete this section.

1. Provide a short title that describes your project.

Click here to insert your answer.

2. Planned project start date (mm-dd-yyyy)

Click here to insert your answer.

3. Planned project end date (mm-dd-yyyy)

Click here to insert your answer.

4. Provide a short description of your project.

Click here to insert your answer.



5. Provide a short description of how your project will demonstrate/benefit Métis and Indigenous Veteran's history, culture, beliefs and/or perspectives.

Click here to insert your answer.

6. Provide a short description of your project ideas and/or design. Attach other files as needed.

Click here to insert your answer.

7. Provide a short description of your project's desired impact whether that consists of a long-term impact (such as a statue or memorial plaque), or a short-term impact (such as holding a commemorative event on a specific date).

Click here to insert your answer.

8. Provide a short description of where your project will take place or be installed, as the case may be.

Click here to insert your answer.

9. Provide a short description of any Métis and/or Indigenous participation that you will utilize in the execution of your project (for example, the use of Métis employees, subcontractors, Indigenous artists, etc.). Please be as accurate as possible regarding numbers of participants and the anticipated cost of their work and value they will bring to the project.

Click here to insert your answer.

#### PART 3: BUDGET ESTIMATE

1. Please indicate how much funding your proposed project will require. Maximum project funding is \$100,000 per year. The total cannot exceed \$200,000 over 2 years. NOTE: your project does not have to total \$100,000, but cannot exceed that value in either year.

Year 1	Year 2	TOTAL
\$	\$	\$

Have you applied for and/or received committed funds from any other sources? Please describe.

Click here to insert your answer.



#### **PART 4: ATTESTATION**

To be eligible for this funding opportunity, you must certify the accuracy of the information you have provided.

Please attest to each of the following statements:

☐ I am the official representative for this expression of interest.

☐ My organization has given me the authority to submit this expression of interest.

☐ I certify and warrant for my organization and in my personal capacity that all of the information I have provided is true, accurate, and complete.

Name of official representative: Click here to insert your answer.

Position title: Click here to insert your answer.

Date (mm-dd-yyyy): Click here to insert your answer.

Please carefully review *all of the information* you have provided before you submit this form.

## **Appendix: MVLP Commemoration Program Procedure**

