

# 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

<input type="checkbox"/> Individual <ul style="list-style-type: none"> <li><input type="checkbox"/> Indigenous people               <ul style="list-style-type: none"> <li><input type="checkbox"/> Métis Nation Citizens</li> </ul> </li> <li><input type="checkbox"/> Non-Indigenous people</li> </ul>	<input type="checkbox"/> Organizational Applicant <ul style="list-style-type: none"> <li><input type="checkbox"/> Indigenous Government, organizations, and institutes               <ul style="list-style-type: none"> <li><input type="checkbox"/> Recognized Métis Nation Government, organizations, and institutes</li> </ul> </li> </ul>
<input type="checkbox"/> Non-Indigenous Government, organizations, and institutes – Organization Type <ul style="list-style-type: none"> <li><input type="checkbox"/> Research or educational institution (such as a university)</li> <li><input type="checkbox"/> Not-for-profit organization</li> <li><input type="checkbox"/> Other – please specify</li> </ul>	

3. Address of Applicant. Give a complete street address and include the city, province, and postal code. Use a format recognized by Canada Post. Visit the [Canada Post website](#) 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.	
<b>1. First and last name</b> <a href="#">Click here to insert your answer.</a>	<b>2. Position title</b> <a href="#">Click here to insert your answer.</a>
<b>3. Telephone number</b> <a href="#">Click here to insert your answer.</a>	<b>4. Email address</b> <a href="#">Click here to insert your answer.</a>
<b>5. Preferred language for written communication. Choose one.</b> <input type="checkbox"/> English <input type="checkbox"/> French	<b>1. Preferred language for spoken communication. Choose one.</b> <input type="checkbox"/> English <input type="checkbox"/> 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 Veterans' 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:
<input type="checkbox"/> I am the official representative for this expression of interest. <input type="checkbox"/> My organization has given me the authority to submit this expression of interest. <input type="checkbox"/> 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:
<a href="#">Click here to insert your answer.</a>
Position title:
<a href="#">Click here to insert your answer.</a>
Date (mm-dd-yyyy):
<a href="#">Click here to insert your answer.</a>

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