

# APPLICATION FOR CONDITIONAL GRANT

## School Community Council

Date: \_\_\_\_\_

School: \_\_\_\_\_

Northern Lights School Division #113  
 Bag Service #6500  
 LA RONGE, SK  
 S0J 1L0

**ATTENTION: Secretary Treasurer**

### Base Rate Schedule

Please see Board of Education Policy #18, Section 7 in the Board Policy Handbook (NLSD #113 website) for a full description of conditional grant processes and guidelines; as per section 7.1.2 grant calculations are as follows:

7.1.2	The grant will be comprised of a base rate plus a schedule determined on the prior year PSSR:	
7.1.2.1	1 <sup>st</sup> 150 Students Base Rate =	\$2,000.00
	Total Grant =	\$2,000.00
7.1.2.2	151 Students and over	
	First 150 Base Rate =	\$2,000.00
	\$8.00 per student over	<u>+8.00 per student</u>
	to a maximum of \$4,800.00	Total Grant
7.1.2.3	Bus committees	\$450.00



# Application for Conditional Grant

Date: \_\_\_\_\_

Northern Lights School Division 113  
Bag Service 6500  
LA RONGE, SK  
S0J 1L0

## **ATTENTION: Secretary Treasurer**

We, the School Community Council of the community of \_\_\_\_\_  
hereby formally apply for a Conditional Grant in the amount of \$\_\_\_\_\_ for the period  
of November 1, 20\_\_\_\_ to October 31, 20\_\_\_\_.

We have read and fully understand the conditions with respect to the Grant. We also agree to  
maintain accounting records as required by Northern Lights School Division 113 and, as well make  
them available for inspection as requested.

## **Signatures:**

\_\_\_\_\_  
Secretary, School Community Council

\_\_\_\_\_  
Chair, School Community Council

Central Office Use
Approved for Payment:
Secretary Treasurer

## Application for Conditional Grant

*Our proposed budget for the forthcoming year*

1. Council Operations <b>As per the <i>Education Act, 1995</i> Council Members shall not receive compensation other than reimbursement of expenses.</b>	\$
2. Postage, Telephone	\$
3. Travel Expense	\$
<b>Other Educational Related Expenditures – (Please Specify)</b> <i>ie: Teacher and Staff Appreciation</i>	\$
4.	\$
5.	\$
6.	\$
<b>TOTAL</b>	\$

We have read and fully understand the conditions with respect to the Grant as outlined in Board of Education Policy #18, Section 7. We also agree to maintain accounting records as required by Northern Lights School Division #113 and, as well, make them available for inspection as required.

**Signatures:**

\_\_\_\_\_  
Secretary, School Community Council

\_\_\_\_\_  
Chair, School Community Council

Central Office Use
Approved for Payment:
Secretary Treasurer