Education Capacity Building Program 9.2

Application Form

Instructions

- 1. Please review all eligibility criteria to confirm that your Community, Organization and Project are eligible for funding through the Energy Support Programs (ESPs). Eligibility criteria are available in the Program Guidelines.
- 2. Applications will be accepted by the IESO on an ongoing basis with Application review dates spread throughout the year. Application review dates will be posted to the ECB Program Website. Evaluation criteria are available in the Program Guidelines.
- 3. Capitalized terms used in the Application, unless otherwise stated, are defined in the Program Guidelines and Funding Agreement sample.
- 4. This Application form must be used to submit the Application. No other formats will be accepted. All fields must either be completed or marked "not applicable".
- 5. Where the applicant is applying to the ECB Program for more than one Project, the applicant must submit a separate Application for each Project.
- 6. The Application form, including Section 6: Application Checklist (Attachment Requirements), must be completed in its entirety to be considered for funding. Where a joint Application is being submitted by two or more applicants, Appendix A and Appendix B must be completed in their entirety by each applicant and the applicant identified in Section 1 of the Application form will be identified as the lead applicant.
- Applicants are encouraged to contact ECB staff with any questions at (416) 969-6317 or ecb@ieso.ca. Program staff are available to provide feedback and guidance throughout Application development.
- 8. As a condition of funding support, the IESO may require changes to the Project scope, design or Budget, and may ask for additional information or references. Please allow sufficient time for Application review and feedback prior to submittal of your final Application.
- 9. The signatory identified in the Application form for all applicants, including joint applicants, must have the ability to bind the applicant.

10. When you are ready to submit your Application, please save the completed Application form in a fixed form (i.e. PDF) and submit to the IESO along with all required attachments. The Application form can be submitted to the IESO in soft or hard copy to either:

Email: ecb@ieso.ca

Mail: Independent Electricity System Operator 120 Adelaide Street West, Suite 1600

Toronto, ON M5H 1T1

Attention: Education and Capacity Building Program

Section 1: Application Title Page

Title	Description
1. Lead applicant name: (Name of the Community or Organization)	
2. Lead applicant mailing address:	
3. Lead applicant type:	First Nation or Métis Community First Nation or Métis Organization If applying as an Organization, please list the represented Communities below that make up this Organization: Other: If 'Other,' please describe the entity:
4. Is this Application being submitted on behalf of joint applicants?	Yes No If 'Yes', please list all joint applicants:
(Select "Yes" only if this is a joint application)	If Yes, Appendix A," Joint Applicant Information Form" and Appendix B, "Joint Applicant Declaration Page" must be completed for each joint applicant.

Title	Description						
5. Category type: (Please select at least one, can select up to three)	Community energy engagement (Up to \$50,000) Energy skills building, project training and certifications (Up to \$75,000) Innovative Knowledge/data sharing models (Up to \$50,000)						
6. Project Title:							
7. Target audience(s) of the proposed Project:	First Nation or Métis Communities First Nation or Métis Organization						
8. Project Team members and roles:	Team Member Name	Team Member Organization	Team Member Title				
(This must include a minimum of three community or organization members)							
9. Total Funding Requested: (This amount must match the amount listed in the Work Plan & Budget below)	The maximum funding amount per Application is \$125,000.						

Section 2: Applicant Contact Information

Title	Description				
10.Primary contact:	Name:				
	Title:				
	Mailing address:				
	Phone number(s):	Main	Alternate		

Title		Desc	ription
	Fax:		
	Emails:		
	Preferred method of contact:		
11.Secondary contact:	Name:		
	Title:		
	Mailing address:		
	Phone number(s):	Main	Alternate
	Fax:		
	Emails:		
	Preferred method of contact:		
12. Signatory:	Name:		
(Signatory must have the signing authority to bind the	Title:		
applicant)	Mailing address:		
	Phone number(s):	Main	Alternate
	Fax:		
	Emails:		
	Preferred method of contact:		

Section 3: Project Information

Description									
Description of Community or Organization (150 words maximum) Please provide a basic description of the First Nation or Métis Community or First Nation or Métis Organization that the Project will benefit, and their energy priorities.									
2. Applicant alimibility (EQ manda manimum)									
2. Applicant eligibility (50 words maximum) Please describe how the lead applicant meets the eligibility requirements of the ECB Program. (See Program Guidelines for eligibility requirements)									

Description
3. Project purpose and description (300 words maximum) Please provide a detailed description of the Project and the applicant's motivation for undertaking the Project. Please outline which category/ies the Project falls under and provide a brief description of how the Project meets the scope of the category/ies identified.
4. Project Team (100 words maximum per Project Team member) Please provide a brief description of the Project Team and summarize how they are qualified to support to the Project.

Description
5. Anticipated impact on Community (200 words maximum) Please provide a detailed description of the anticipated impact on the applicable First Nation or Métis Community or First Nation or Métis Organization. This can include: a) Contributions to energy security b) Social/economic benefit c) Increased knowledge and understanding of energy and energy system participation
6. Future capacity linkages (125 words maximum) Please describe how this Project will contribute to the long term capacity building of the target audience(s). How will the learnings, materials or resources that arise as part of the Project contribute and link to future energy goals of the Community or Organization?

Description								
Community involvement (150 words maximum) Please provide a detailed description of how Community or Organization members have been or will be involved. Each applicant must include a Band Council Resolution, board resolution or other endorsing document as appropriate.								

Section 4: Work Plan and Budget

- 1. Please provide information for the Work Plan and Budget in the following table. Please refer to the Sample Work Plan and Budget included below, to support your completion of Section 4.
- 2. You will be required to provide detailed information on each Activity that will be undertaken for the Project which must include a detailed description of the scope of Work, ECB Team members conducting the Work, and Budget. The Work Plan and Budget table provides space for five (5) Milestones. If you require additional lines for Activities, please visit the Website and download the Work Plan and Budget: Additional Activities Form, complete it in accordance with these instructions and submit with your Application.
 - a. Scope of Work for the Activity: the detailed description must include, but is not limited to:
 - 1) a detailed description of the Activity
 - 2) how the Work will be managed
 - 3) how any Costs for this activity related to Travel, Meal and Hospitality will remain in compliance with Section 3(c) of the Program Guidelines and in accordance with the Ontario Travel, Meal and Hospitality Expenses Directive.
 - b. Under the Budget, "Total Funding from Other Source(s)" must be deducted from the 'Total Cost of Activity/ies' before determining the eligible Total ECB Funding Requested.
 - c. Name of Other Sources of Funding
 - You will be required to identify the name of any other sources of funding who will be providing any funding in respect of each Activity in the table and the amount of funding being provided.
 - d. For each Activity, you must identify any and all Internal Resources and External Resources that will be undertaking the Activity. The ECB Team members should comprise of the individuals listed under Section 1 of the Application. Please list each Internal Resource and External Resource by individual.
- 3. The *Total Requested Funding for all Milestones under ECB* is inclusive of <u>all</u> Activities for which you are requesting funding through the ECB Program, including any Activities identified on the <u>Work Plan and Budget Additional Activities Form</u>.
- 4. Funding provided under the ECB Program will be provided for Eligible Expenses that are incurred directly by the successful applicant in order to complete the Project. Funding will not be provided for any Ineligible Expenses that are identified in Section 3(c) of the Guidelines.

	SAMPLE WORK PLAN AND BUDGET (excludes HST)								
	Activities to be Completed	Resource Name, Title, Company and Logistics	Total Cost of Resource (\$)	Targeted time Required for Activity	Targeted Start Date	Planned Output(s)	Budget Total Cost Activity (excludes HST)(\$)		
	rental and food and beverage preparation o printing and photocopying meeting materials o translation and note-taking during the	Anna Benson, Project Manager, ABC First Nation	\$1,500.00	1 Month			\$10,000.00		
		TBD, Administrative Support	\$1,500.00		January 1, 2021	 Two (2) community meetings Handout 500 pamphlets Engage 50 community members Final Community Presentation 			
(Sample Only)		Sam Smith, Community Outreach Coordinator, Outreach Organization	\$1,500.00						
Milestone 1		Quentin Quentin McIntyre, Associate Engineer, Engineering Firm ABC	\$1,500.00						
		Logistics Cost	\$4,000.00						
	1.2 Hire two interns to act as project support and Workshop Assistants	Anna Benson, Project Manager, ABC First Nation	\$2,000.00	2 Months	February 1, 2021		\$7,000.00		

SAMPLE WORK PLAN AND BUDGET (excludes HST)						
Activities to be Completed	Resource Name, Title, Company and Logistics	Total Cost of Resource (\$)	Targeted time Required for Activity	Targeted Start Date	Planned Output(s)	Budget Total Cost of Activity (excludes HST) (\$)
Scope of Work: - ABC First Nation will hire two Indigenous students from a relevant academic institution in the Constant Taxanta Apparts assisting the	TBD, Administrative Support	\$2,000.00			- Job posting to hire students - Successful	
in the Greater Toronto Area to assist in the delivery of the project. Their training will include, but not be limited to: (a) Facilitating relevant workshops and key energy issues relevant to First Nation Communities; (b) establish connections with additional First Nation communities; (c) coordinate and track dialogue and information sharing between First Nation communities participating in the network. This will be a part-time, 4-month position. - outreach to First Nation communities about the opportunity to participate in the network	Sam Smith, Community Outreach Coordinator, Outreach Organization Co.	\$3,000.00			candidates' qualifications and CVs	
			•	Total Cost	of Activity/ies	\$17,000.00
Name of Other Source(s) of Funding	In-kind contribution from ABC First Nation	To	otal Fundin	g from Oth	er Source(s) if applicable	\$2,000.00
Total Requested Funding for Milestone 1 under ECB (Total Cost of Activity/ies – Total Funding from Other Source(s) Up to 20% of the Maximum Funding Amount Requested					\$15,000.00	

	WORK PLAN AND BUDGET (excludes HST)								
		Activities to be Completed	Resource Name, Title, Company and Logistics	Total Cost of Resource (\$)	Targeted time Required for Activity	Targeted Start Date	Planned Output(s)	Budget Total Cost of Activity (excludes HST) (\$)	
	1	.1							
_									
	Milestone T								
	1	2							

	Activities to be Completed	Resource Name, Title, Company and Logistics	Total Cost of Resource (\$)	Targeted time Required for Activity	Targeted Start Date	Planned Output(s)	Budget Total Cost of Activity (excludes HST) (\$)	
	1.3							
				_				
				-				
1								
Milestone								
Σ								
	Total Cost of Activity/ies							
	Name of Other Source(s) of Funding							
	Total Requested Funding for Milestone 1 under ECB							
	(Total Cost of Activity/ies – Total Funding from Other Source(s)							
		Up to 20%	of the Ma	ximum Fun	ding Amou	int Requested		

	Activities to be Completed	Resource Name, Title, Company and Logistics	Total Cost of Resource (\$)	Targeted time Required for Activity	Targeted Start Date	Planned Output(s)	Budget Total Cost of Activity (excludes HST) (\$)
	2.1						
le 2							
Milestone 2							
	2.2						

	Activities to be Completed	Resource Name, Title, Company and Logistics	Total Cost of Resource (\$)	Targeted time Required for Activity	Targeted Start Date	Planned Output(s)	Budget Total Cost of Activity (excludes HST) (\$)
	2.3						
one 2							
Milestone							
				-	Total Cost	of Activity/ies	
	Name of Other Source(s) of Funding					Funding from er Source(s) if applicable	
			_	_		e 2 under ECB Other Source(s)	

	Activities to be Completed	Resource Name, Title, Company and Logistics	Total Cost of Resource (\$)	Targeted time Required for Activity	Targeted Start Date	Planned Output(s)	Budget Total Cost of Activity (excludes HST)(\$)
	3.1						
83							
Milestone 3				-			
	3.2						
				-			

	Activities to be Completed	Resource Name, Title, Company and Logistics	Total Cost of Resource (\$)	Targeted time Required for Activity	Targeted Start Date	Planned Output(s)	Budget Total Cost of Activity (excludes HST) (\$)
Milestone 3	3.3						
				1	Total Cost o	of Activity/ies	
	Name of Other Source(s) of Funding					Funding from er Source(s) if applicable	
			_	_		e 3 under ECB Other Source(s)	

	Activities to be Completed	Resource Name, Title, Company and Logistics	Total Cost of Resource (\$)	Targeted time Required for Activity	Targeted Start Date	Planned Output(s)	Budget Total Cost of Activity (excludes HST) (\$)
	4.1						
Milestone 4							
Miles							
	4.2						

	Activities to be Completed	Resource Name, Title, Company and Logistics	Total Cost of Resource (\$)	Targeted time Required for Activity	Targeted Start Date	Planned Output(s)	Budget Total Cost of Activity (excludes HST)(\$)
Milestone 4	4.3						
					 Γotal Cost	of Activity/ies	
	Name of Other Source(s) of Funding					Funding from er Source(s) if applicable	
	Total Requested Funding for Milestone 4 under ECB (Total Cost of Activity/ies – Total Funding from Other Source(s)						

	Activities to be Completed	Resource Name, Title, Company and Logistics	Total Cost of Resource (\$)	Targeted time Required for Activity	Targeted Start Date	Planned Output(s)	Budget Total Cost of Activity (excludes HST) (\$)
	5.1						
Milestone 5							
Miles							
	5.2						

	Activities to be Completed	Resource Name, Title, Company and Logistics	Total Cost of Resource (\$)	Targeted time Required for Activity	Targeted Start Date	Planned Output(s)	Budget Total Cost of Activity (excludes HST)(\$)
	5.3						
2							
Milestone							
Σ							
				7	Total Cost	of Activity/ies	
	Name of Other Source(s) of Funding				Total Oth	Funding from er Source(s) if applicable	
			-	_		e 5 under ECB Other Source(s)	
,	ou require space for additional Activities? Yes, a supplementary <i>Work Plan and Budget: Ad</i> Activities. No, additional space is not required.	ditional Activities	<i>Form</i> has be	een attached	l to this App	lication for addition	onal
	If Yes, please transfer Total Cost of Additional Activ				-		
	If Yes, please transfer Total Funding from Other So	ource(s) of Addition	ai Activities fo	or all Milestone		Plan and Budget: nal Activities Form	
		Total Co	ost of Activ	ity/ies for	all Milesto	nes under ECB	
	Total Funding from Other Source(s) for all Milestones under ECB						
		Total Re	equested F	unding for	all Milesto	nes under ECB	
		(Total Cost	of Activity/id	es – Total Fu	unding from	Other Source(s)	

Section 5: Applicant Declaration

The following page must be printed, signed and submitted with your ECB Application (for electronic submissions a scanned copy may be provided). Where the Application is in respect of joint applicants, a signed copy of Appendix B: Joint Applicant Declaration Page B must be submitted for each joint applicant. Breach of the representations, warranties and agreements may result in the rejection of the Application by the IESO.

I represent and warrant to, and agree with, the IESO, and acknowledge that the IESO is relying on such representations, warranties, and agreements as a condition precedent to the review and, if applicable, the acceptance of this Application, as follows:

- 1. The information contained in the Application is true, accurate and complete in all material respects.
- 2. As of the date set out below, the applicant and the Project meet all the applicable eligibility criteria set out in Section 3 of the ECB Program Guidelines.
- 3. I am not in default, and have never been in default, of any existing agreements with the IESO, its predecessor entities, or any of their third party fund managers, including funding agreements under other support programs.
- 4. Other than as set out in the Application, I have not received, and do not expect to receive, any funding for any Activities that are, or could be perceived to be, duplicative of funding requested under the Application.
- 5. I have read the ECB Program Guidelines, and acknowledge that if this Application is successful, the applicant will be required to enter into the ECB Funding Agreement to receive funding.
- 6. I consent and have sought and received the consent of the applicant's Affiliates for the IESO to (a) communicate with the Affiliates or any other relevant third parties, and (b) use all information, including Confidential Information, in the possession of the IESO, for the purposes of evaluating and accepting or rejecting the Application.
- 7. I acknowledge that the IESO has advised the applicant to seek independent legal advice with respect to the subject matter of this Application, and subsequently, I acknowledge and agree that the applicant has had the opportunity to do so.
- 8. I acknowledge that the IESO reserves the right to make public the name of the applicant and any respective Affiliate, the title and summary of the Project, the amount of any funds awarded, and any information in the Application not clearly identified as Confidential Information by the applicant.
- 9. I acknowledge that the IESO reserves the right to accept or reject any Application for any reason, and that receipt by the IESO of this Application does not constitute a commitment by the IESO to provide funding to the applicant, nor does it create any business relationship between the applicant and the IESO.
- 10. I acknowledge that the IESO may at any time cancel, suspend or amend all or any part of the ECB Program.

THE APPLICANT HAS READ AND AGREES WITH THE ABOVE DECLARATIONS:

Name of Applicant	Date
Cinnatorala Nama (mint)	Cianatana Cianatana
Signatory's Name (print)	Signatory Signature <i>I have the authority to bind the</i>
	Applicant.

Section 6: Application Checklist (Attachment Requirements)

- The following supporting documentation must be attached with the Application form. Unless there is a "If Applicable" option, all attachments must be included in your Application submission.
- Please ensure you have made the appropriate selection under the Status column for each required document and attached all corresponding documentation with your Application.
- Where the Application is being submitted electronically, please identify the file name of each attachment in the "File Name(s) in Submission" column below. Where the Application is being submitted in hard copy, please clearly number each attachment in the upper-right hand corner of the first page of each attachment, and identify the item number in the "File Name(s) in Submission" column below.

Required Document(s)	Status	Additional Instruction	File Name(s) in Submission
Signed Applicant Declaration Page		The Applicant Declaration Page must be printed, signed by the signatory, and scanned (PDF) as part of the Application.	
Signed Joint Applicant(s) Declaration Page(s) (if applicable)		A copy of the Joint Applicant Declaration Page must be provided for each joint applicant. The Joint Applicant Declaration Page must be printed, signed by the signatory for each joint applicant, and scanned (PDF) as part of the Application.	
Joint Applicant(s) Information Page(s) (if applicable)		A completed 'Appendix A: Joint Applicant Information' page is required for each joint applicant applicable to this Application.	
Evidence demonstrating support from the applicant Community or Organization		Evidence must be provided that the applicant Community or Organization is supportive of the Application to the ECB Program and the Project. This can include:	
		a) A Band Council Resolution (BCR)b) A board resolutionc) Other endorsing documents as appropriate.	

Required Document(s)	Status	Additional Instruction	File Name(s) in Submission
Evidence demonstrating support from the joint applicant Community or Organization (if applicable)		Evidence must be provided for each joint applicant that the Community or Organization is supportive of the Application to the ECB Program and the Project. This can include: a) A Band Council Resolution (BCR) b) A board resolution c) Other endorsing documents as appropriate.	
Job description for Internal Resource(s) or External Resource(s) not yet hired (if applicable)		A job description is required for each Internal Resource or External Resource not yet retained must be submitted, which must include the qualifications of the Resource and the selection criteria that will be used to retain the individual.	

Appendix A: Joint Applicant Information

Instructions:

Please complete this section if the Application is being submitted by joint applicants. If the Application is being submitted by more than one joint applicant, please fill out a Joint Applicant Information form for each applicant:

Appendix A:	Joi	nt Applicant Information		
1. Joint applicant name: (Name of the Joint Community or Organization)				
2. Joint applicant type:	First Nation o	or Métis Community		
	Remote First	Nation or Métis Community		
	First Nation o	or Métis Organization		
		Organization, please list the represented with that make up this Organization:		
	Non-Indigenous entity			
	If selected, please	describe the entity:		
3. Signatory: (Signatory must have the	Name:			
signing authority to bind the applicant)	Title:			
, ,	Mailing address:			
	Phone number(s):	Main Alternate		
	Fax:			
	Emails:			
	Preferred method of contact:			

	Appendix A:	Joint Applicant Information
4.	Description of Community or Organization (150 words maximum) Please provide a detailed description of the joint applicant.	
_	A	
5.	Applicant eligibility (50 v Please describe how the join	t applicant meets the eligibility requirements of the program.
6.	Joint applicant rationale Please provide a description enhance the access or delive	of how the joint Application will strengthen the Project or

Appendix B: Joint Applicant Declaration

The following page must be printed, signed and submitted with your ECB Application (for electronic submissions a scanned copy may be provided). Where the Application is in respect of joint applicants, a signed copy of Appendix B: Joint Applicant Declaration Page B must be submitted for each joint applicant. Breach of the representations, warranties and agreements may result in the rejection of the Application by the IESO.

I represent and warrant to, and agree with, the IESO, and acknowledge that the IESO is relying on such representations, warranties, and agreements as a condition precedent to the review and, if applicable, the acceptance of this Application, as follows:

- 1. The information contained in the Application is true, accurate and complete in all material respects.
- 2. As of the date set out below, the joint applicant and the Project meet all the applicable eligibility criteria set out in Section 3 of the ECB Program Guidelines.
- 3. I am not in default, and have never been in default, of any existing agreements with the IESO, its predecessor entities, or any of their third party fund managers, including funding agreements under other support programs.
- 4. Other than as set out in the Application, I have not received, and do not expect to receive, any funding for any activities that are, or could be perceived to be, duplicative of funding requested under the Application.
- 5. I have read the ECB Program Guidelines, and acknowledge that if this Application is successful, the joint applicant will be required to enter into the ECB Funding Agreement to receive funding.
- 6. I consent and have sought and received the consent of the joint applicant's Affiliates for the IESO to (a) communicate with the Affiliates or any other relevant third parties, and (b) use all information, including Confidential Information, in the possession of the IESO, for the purposes of evaluating and accepting or rejecting the Application.
- 7. I acknowledge that the IESO has advised the joint applicant to seek independent legal advice with respect to the subject matter of this Application, and subsequently, I acknowledge and agree that the joint applicant has had the opportunity to do so.
- 8. I acknowledge that the IESO reserves the right to make public the name of the joint applicant and any respective Affiliate, the title and summary of the Project, the amount of any funds awarded, and any information in the Application not clearly identified as Confidential Information by the joint applicant.
- 9. I acknowledge that the IESO reserves the right to accept or reject any Application for any reason, and that receipt by the IESO of this Application does not constitute a commitment by the IESO to provide funding to the joint applicant, nor does it create any business relationship between the joint applicant and the IESO.
- 10. I acknowledge that the IESO may at any time cancel, suspend or amend all or any part of the ECB Program.

THE JOINT APPLICANT HAS READ AND AGREES WITH THE ABOVE DECLARATIONS:

Name of Joint Applicant	Date
Signatory's Name (print)	Signatory Signature I have the authority to bind the Joint Applicant