# **Emergency Food Security Fund Application for Parish Communities**

# Funded by ShareLife, Catholic Charities, and an anonymous donor

The purpose of this one-time funding is to improve access to food for people experiencing food insecurity within parish communities in the Archdiocese of Toronto. Eligible projects will be considered based on their community impact, viability, and sustainability. The Society of Saint Vincent de Paul with its extensive history of supporting persons experiencing food insecurity will be managing the application process and recommending successful applicants for funding. Existing food outreach programs operated by the Society of Saint Vincent de Paul are not eligible for this funding envelope.

Funds may be used for the purchase, preparation, and distribution of food to persons experiencing food insecurity.

**Application deadline**: September 30, 2024

Please send your completed application form to application@ssvptoronto.ca

For programs that received funding in 2023, please complete Section A For new programs, please complete Section B Both existing and new programs, please complete Section C

# Section A – For Programs Funded in 2023

Parish community requesting fur	ınding:	
Location of Food Program:		
Application prepared by:		
Email Address:	Phone Number:	
Program Type (please che	ck all that applies)	
Food Bank		
Food Pantry (emergency s	supplies)	
Meal Program (closed, reg	gistration required)	
Meal Program (open, anyo	one can attend)	
Outreach		
Snack Program (closed, re	egistration required)	
Snack Program (open, any	one can attend)	
Other:		_
Scope of Program  Number of persons assisted on a	a weekly basis:	
Are you serving a particular gro	oup?	
Frequency of service:		
Number of volunteers:		
Number of staff:		
Funding sources:		

#### **Facility Information**

How do you deliver the program:
Food Supplies (currently)
Food is being sourced from local stores
Food is provided by Second Harvest and/or local food bank
Food is being donated by local companies/ community agencies
Food is provided by donors
What impact did this grant have on your services last year?
How did you publicize that this grant was made possible through ShareLife and an anonymous donor?

F	und	ing	Rea	ues	ted	for	2024	1
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Please indicate the amount of funding you are requesting:		
How will these funds be used, please provide details:		
What will the impact be if you do not receive the funding:		

# **Section B – For New Programs**

Parish community requesting funding:
Location of Food Program:
Application prepared by:
Email Address: Phone Number:
Proposed Program Type (please check all that applies)
Food Bank
Food Pantry (emergency supplies)
Meal Program (closed, registration required)
Meal Program (open, anyone can attend)
Outreach
Snack Program (closed, registration required)
Snack Program (open, anyone can attend)
Other:
Scope of Program
Number of people expected to be assisted on a weekly basis (explain how number was arrived at):
Are you serving a particular group?
Frequency of outreach:
Number of volunteers required:
Number of staff required:
What other funding have you sourced:

#### **Facility Information**

How will you deliver the program:
Food Supplies
Food will be sourced from local stores
Food will be provided by Second Harvest and/or local food bank
Food will be donated by local companies/ community agencies
Food will be provided by individual donors
Funding Requested
Please indicate the amount of funding you are requesting:
How did you determine your community needed this program?
How will these funds be used, please provide details:

What will the impact be if you do not receive the funding:
If successful in your funding application, what will you do to promote that this grant was made possible by ShareLife, Catholic Charities, and an anonymous donor:

# **Section C – New and Existing Programs**

Is the parish priest and community aware of this initiative?					
Are you aware that community-based food programs are subject to legislative compliance for safe handling, storage, and distribution of food products?					
Any further information you wish to share?					
For further information or clarification on the outreach, who should we contact:	Name:				
	Email:				
Application Completed by:					
Application Submitted to the Soc	ciety of S	aint Vincent de Paul on (da	te):		
Thank you for your time in completing the application form!  Successful applicants will be contacted.					
Office use only:	Appl	ication received on date:			