

Tenant Action Funds application form



Toronto
Community
Housing



Tenant Action Funds application form

Application number (For Toronto
Community Housing use only):

Part A : Applicant information

Type of application

Tenant

Tenant group

Applicant name (if it is a tenant group, list all the members):

Address:

Region:

Central

East

Seniors

West

Email (if it is a tenant group, list the primary contact):

Phone number (if it is a tenant group, list the primary contact):

Would you like to be added to our Tenant Engagement System email distribution list?

Yes

No

The personal information requested in this form is collected under the authority of s. 28(2) the Municipal Freedom of Information and Protect of Privacy Act. The information will be used for Tenant Engagement System Refresh purposes. If you have any questions about the collection of this information, please contact the Information Specialist, 931 Yonge Street, Toronto, ON, M4W 2H2, 416-981-5500.

Tenant Action Funds application form

Part B : Community support

List a minimum of eight tenants from your building/townhouse committee that support your application. No more than two signatures from the same household will be accepted.

#	Tenant name	Address	Phone number or email	Signature
1				
2				
3				
4				
5				
6				
7				
8				

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Part C : Project information

Project name: _____

Expected start date: _____

Expected end date: _____

Project type:

Single event/activity

Multiple events/activities

1. What do you hope this project will accomplish?

Connect tenants to services and opportunities

Develop partnerships and networks to deliver local programs and services that will improve social conditions and promote safer communities

Increase tenant participation in activities that influence tenants' quality of life.

Describe the project and why are you proposing it. Please specify in the box below or attach your document.

Tenant Action Funds application form

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2. Which local community priority relates to your project? Check all that apply.

Capital investment

Communications

Community building activities

Community programs

Community space

Employment training

Maintenance

Pest control

Safety and security

Waste management and recycling

Other: _____

3. Who will benefit from this project? Select your target population.

Children

Youth

Adults

Seniors

Families

Community

Other: _____

Please describe how this project will benefit the community. Provide details in the box below or attach your documents.

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4. How many tenants do you expect to participate?

5. How do you plan to report back on the success of your project? Check all that apply.

Photos

Feedback from participants

Short video

Attendance sign-in sheets

Other: _____

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What does success for your project look like? Please provide details below or attach your documents.

Tenant Action Funds application form

Part F: Declaration

Check off each box to acknowledge that consideration has been given

Resources requested will only be used for eligible expenses listed and solely for the purpose of the project. Resources will not be utilized for personal use.

All funds will be reconciled by submitting original itemized sales receipts along with a completed expense report form and any unused funds within 14 days of project completion. Expenses cannot be incurred before the date an application is approved.

Funded applicants are responsible for both the use and reconciliation of funds.

All successful applicants will submit a brief summary report once the project is completed. The summary includes highlights and challenges of the project, how many tenants participated in the project and/or tenants testimonials. Any photos or video provided must have tenants' consent. A project template will be provided.

All funded applicants must reconcile funds before seeking further resources. Funded applicants will not receive further resources if funds are misused or unreconciled.

All decisions made by the Tenant Action Funds Table are final. Feedback for rejected applications will be provided upon request. Tenants are allowed to resubmit rejected applications.

All sections A to E of application form are completed.

Applicant signature (if it is a tenant group, use primary contact's signature):

Applicant name (if it is a tenant group, use primary contact's name):

Date:

Get in touch



torontohousing.ca/TAF



taf@torontohousing.ca



@TOhousing



@torontohousing



#YourcommunityYoursay



416-981-4435



@TorontoCommunityHousing



@TorontoCommunityHousing



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