



# Language Revitalization Planning Program 2016-2017 Application Information

**Application Deadline:**  
**Friday, April 29, 2016 at 4:00pm**  
 Please submit completed applications to:  
[aliana@fpcc.ca](mailto:aliana@fpcc.ca)

**Eligibility:**

Applications must include one primary applicant and a minimum of two co-applicants. Each co-applicant should be a representative from a collaborating community that shares the same language. If only 2 communities share your language, the second co-applicant can be a representative from an organization, such as a tribal council, school board, or other organization. Priority will be given to applicants who have not previously received funding from this program. Applicants with incomplete reporting on previous funding from FPCC (all programs) will not be considered.

**Program Outline:**

**Stage 1:** Application submissions via email to [aliana@fpcc.ca](mailto:aliana@fpcc.ca) or fax 250-652-5953, **Deadline: April 29, 2016**

**Stage 2:** Application review by FPCC, May 2016

**Stage 3:** Training Workshop, **June 24-25, 2016**

- Attendance is mandatory for the Language Planning Specialist. An additional travel grant will be provided to cover travel and accommodation costs for the training. Other community members are welcome to attend at their own cost. (Grant money may be used to support attendance by other community members.)

**Stage 4:** Language Planning Program implementation: July 2016 – March 2017

- Funding will be distributed in three parts: one third will be issued at the beginning of the program; one third will be issued upon completion of an interim report; and the remaining third will be issued upon FPCC's receipt of the final report (due March, 2017)
- Grant recipients must hire a Language Planning Specialist to coordinate and carry out the program activities. The Language Planning Specialist must be hired by June 2016, in order to participate in the mandatory training workshop. Please find a sample job description for this position here: <http://www.fpcc.ca/language/Programs/Language-authority.aspx>

**Outline of Budget:**

The available grant for each project is \$18,500.00. An additional 25% in-cash contribution from your organization is required. The following is a **sample budget** that may be used for your program.

Language Planning Specialist (suggested rate: \$18/hr at 0.5 FTE for 30 weeks)	\$ 10,800
Honoraria	\$ 4,000
Meeting Costs	\$ 1,700
Travel Costs	\$ 2,000
<b>TOTAL</b>	<b>\$ 18,500</b>

**IMPORTANT:** Before you apply for funding, please read the **Language Revitalization Planning Program – Program Description** available at: <http://www.fpcc.ca/language/Programs/Language-authority.aspx>



## Language Revitalization Planning Program 2016-2017 Application Form

<b>For Office Use Only</b>	<b>File Number</b>
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<b>1a. Primary Applicant Information:</b>	
<b>Primary Contact Person:</b>	<b>Position:</b>
<b>First Nation or Organization (payee that will receive funding):</b>	
<b>Mailing Address (address, city/town, postal code):</b>	
<b>Telephone:</b>	<b>Fax:</b>
<b>Email:</b>	<b>First Nation:</b>
<b>1b. Collaborating Community Co-Applicant: (must be from a different community than the primary applicant)</b>	
<b>Name:</b>	<b>Position:</b>
<b>Mailing Address (address, city/town, postal code):</b>	
<b>Telephone:</b>	<b>Fax:</b>
<b>Email:</b>	<b>First Nation:</b>
<b>1c. Collaborating Community / Organization Co-Applicant: (must be from a different community/organization than the primary applicant)</b>	
<b>Name:</b>	<b>Position:</b>
<b>Mailing Address (address, city/town, postal code):</b>	
<b>Telephone:</b>	<b>Fax:</b>
<b>Email:</b>	<b>First Nation/Organization:</b>

<b>2. Language Information:</b> Provide the name of your language and the dialects in the language
<b>Language:</b>
<b>Language Dialects:</b>
<b>Language Needs Assessment #: _____</b> (Should be a current LNA for each collaborating community).



**3. Collaborating Communities/Organizations:** Collaboration is central to the Language Revitalization Planning Program. Collaboration with all the communities sharing your language is required.

**3a.** List **all** the communities that share your language:

**3b.** Identify all communities and organizations that will be immediately involved in this project, and explain their role (i.e. co-applicant; participating community/organization):

**3c.** Who is not participating, and why?

**4. Stakeholders:** Who are the stakeholders that will participate in your language planning activities this year? For each collaborating community, list key stakeholders, including: language advocates, Elders, speakers, teachers, ECE workers, youth representatives, leadership representatives, etc. How they contribute to your language planning initiative?



**5. Current Language Planning Summary:** Provide a summary of the language planning work that has been done, to-date, in your community and the collaborating communities. (I.e. Do you have a current language plan? Do you have an active "Language Authority"? Do you have a vision statement, mission statement, or policy statement for your language? Do you have a centralized repository of language resources?)

**6. Project Activities:**

The following activities constitute a significant part of developing a language plan. These are the recommended activities for the Language Revitalization Planning Program. The first two activities are required for this program. The other activities may be completed according to your needs and current situation. Please indicate (check the box) which activities you intend to undertake this year. Please refer to the **Language Revitalization Planning Program Overview** for details and explanation of each of these activities.

- Required Activities:**
1. Hire a Language Planning Specialist. *The funding for this program provides for a part-time Language Committee Coordinator (e.g. 18 hours per week for 27 weeks). Please see the job description for this role at: <http://www.fpcc.ca/language/Programs/Language-authority.aspx>.*
  2. Host a minimum of four language planning meetings. *These meetings must include representatives from each collaborating community/organization.*

<b>Selected Activities:</b> Please identify which tasks your communities have already completed, and which tasks you intend to undertake this year.	<b>Completed</b>	<b>Will Complete</b>
3. Hold a community mobilization meeting	<input type="checkbox"/>	<input type="checkbox"/>
4. Develop a vision statement	<input type="checkbox"/>	<input type="checkbox"/>
5. Complete a community language assessment survey	<input type="checkbox"/>	<input type="checkbox"/>
6. Create a repository for language resources	<input type="checkbox"/>	<input type="checkbox"/>
7. Develop a terms of reference	<input type="checkbox"/>	<input type="checkbox"/>
8. Develop a language plan	<input type="checkbox"/>	<input type="checkbox"/>
9. Develop a language policy	<input type="checkbox"/>	<input type="checkbox"/>





**8. Language Planning Budget:** A 25% cash contribution from your organization/community is required. Please also identify if any additional funding will be provided from another source. Maximum grant: \$18,500.

**Examples of eligible expenses:**

- Language Planning Specialist – salary (i.e. \$18/hr at 0.5 FTE for 30 weeks)
- Honoraria
- Travel costs (i.e. to attend meetings)
- Travel costs for additional community members to attend program training
- Meeting costs
- Administration (maximum 5% of grant)

Describe Expense	FPCC Grant Amount	25% Cash Contribution & Other Funding Sources
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
<b>Total in-Cash Contribution (Must Be 25%) &amp; Other Funding Source Contribution</b>		\$
<b>Total FPCC Funding:</b>	<b>\$ 18,500</b>	
<b>Total FPCC and Other Funding:</b>	<b>\$</b>	

**10. Finance Personnel**

Does your organization have a designated person dealing with your finances (bookkeeper or accountant)? Please provide name, title and contact information.

Yes \_\_\_\_\_ No \_\_\_\_\_

<b>Name:</b>	<b>Title:</b>
<b>Email:</b>	<b>Telephone</b>

**11. Application Checklist:** Review the required items in the checklist and confirm that each item is complete and/or attached by checking the corresponding box.

1) Application is complete and signed	<input type="checkbox"/>
2) Completed online Language Needs Assessment is attached	<input type="checkbox"/>



3) Signature from the Band Manager/Administrator of primary applicant if funding is through the band, or CEO/Director if funding is through an organization, is included in the application	<input type="checkbox"/>
4) Letter of support from each co-applicant is attached	<input type="checkbox"/>
5) Cover letter that describes the context and goals of the language planning work is attached	<input type="checkbox"/>

## 12. Signing Authority

I declare that the information in this application is accurate and complete. The application is submitted on behalf of the organization with its full knowledge and consent. If financial funding is approved it will be used only for the purposes specified in this application.

After signing, the organization I represent agrees to honour the terms and conditions for any funding contract issued by FPCC respecting this proposal. Any debts incurred by this project will be the responsibility of the applicant organization.

### Primary Applicant:

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

Signature: \_\_\_\_\_

### Band Manager/Administrator or CEO/Director for Primary Applicant Community:

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

Signature: \_\_\_\_\_

### Collaborating Community Co-applicant:

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

Signature: \_\_\_\_\_

### Collaborating Community/Organization Co-applicant:

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

Signature: \_\_\_\_\_