## **Boomer's Legacy Fund Application**

Completed form to be sent by email to Boomerslegacy@cfmws.com

Part A – Contact Information					
Base/Wing:		Telephone:			
Contact Name and Rank/Title:		Cell:			
Mailing Address:		Fax:			
City:	Province:		Email:		
Postal Code:		Alternate Ema	ail:		
Part B – Project Information					
Project Name:	Start Date:		End Date:		
Location of Project:					
City:	Province:		Postal Code:		
Telephone:	Cell:		Fax:		
Brief Description of Project:					

Please description the specific need(s) you have identified and wish to address through this project. Explain how your project fills a void in the current resources available and
how your proposal relates to Boomer's Legacy's mandate.
How are CF members contributing to the success of this project?
Who will benefit from this project? Please provide a description of your intended
beneficiaries, both qualitative (who) and quantitative (how many). Include direct and
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Part C - Timeline				
Please provide an estimated timeline for yo	ur project, highlighting major steps/importan			
t dates.				
Part D – Budget				
Please provide an estimated overall budge	for your program, by expense category.			
*Please note that expense categories can l	ne changed and/or added to fit your project.			
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Expense	Overall Cost			
	Overall Gost			
Operating Costs				
Travel				
Travel				
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Travel Activities				
Activities				
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Activities  Accommodations  Supplies  Promotion				
Activities  Accommodations  Supplies  Promotion  Misc				
Activities  Accommodations  Supplies  Promotion				

List other sources of funding for which you have applied, as well as their current status (secured, pending or rejected).				
Source	Amount Requested	Status		
Part E – Additional Information				
Has this proposal been vetted through a local committee? ☐ Yes ☐ No				
Please provide any addition would like to have considered	al information or explanation al	bout your project that you		
For Internal Use				
Unit Recommendation: ☐ Supported in the amount of \$				
Unit Commanding Officer				
Base/Wing Recommendation: ☐ Supported in the amount of \$ ☐ Not Supported				
Base/Wing Commander				