|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| | 2022-2023 EXPRESSION OF INTEREST APPLICATION | | --- | | **AUTHORIZATION** | | **Notice to Applicants**  The information collected in your application will be used, and may be disclosed, for the purposes of assessing the merits of your application. As part of the assessment process, the information may be shared with external consultants, review committee members, officials in other departments, federal, provincial and/or territorial governments or Members of Parliament.  It may also be used and/or disclosed for policy analysis, research, and/or evaluation purposes. In order to conduct these activities, various sources of information under the custody and control of the Canadian Northern Economic Development Agency (CanNor) may be linked. However, these additional uses and/or disclosures of information will not impact your project.  In the event that the application contains personal information, the personal information will be administered in accordance with the ***Privacy Act***. The application is also subject to the ***Access to Information Act***(“ATIA”). The ATIA provides every person with a right of access to information under the control of the department, subject to a limited set of exemptions. Instructions for obtaining access to this information are outlined in the government publication entitled ***Info Source***.  **Initials:**    **Check to certify you have read and agree with the statement above.**  Authorization: This section is to be completed by a representative of the applicant duly authorized to make this declaration in submission of a funding application to the Canadian Northern Economic Development Agency.    Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Title \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | |  | |  | | | | | | | | | | | | | | | | | | | | |
|
| **APPLICANT AND CONTACT INFORMATION** | | | | | | | | | | | | | | | | | | | |
| 1. Legal Name of Applicant |  | | | | | | | | | | | | | | | | | | |
| 1. Project Name |  | | | | | | | | | | | | | | | | | | |
| 1. Primary Contact Name |  | | | | | | | | | | | | | | | | | | |
| 1. Phone Number |  | | | | | | 1. Email Address | | | |  | | | | | | | | |
| 1. Applicant Mailing Address |  | | | | | | | | | | | | | | | | | | |
| 1. Applicant Business Number (9 digit identifier provided by CRA) |  | | |  | |  | |  | |  | | | |  | |  |  | |  |
| 1. Sector Type | Applicant Industry Sector: | | | |  | | | | | Project Impact Sector: | | | | |  | | | | |
| 1. Applicant Type: Check all that apply. | | | | | | | | | | | | | | | | | | | |
| For-Profit Business | 🞏 | | Non-Profit Association | | | | | | 🞏 | | | | Indigenous Government | | | | | 🞏 | |
| Territorial Government | 🞏 | | Municipal Government | | | | | | 🞏 | | | | Other: *Please Specify* | | |  | | | |
| 1. **Brief description** of your organization or business and its mandate. | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | |
| **PROJECT INFORMATION** | | | | | | | | | | | | | | | | | | | |
| 1. Project Location Address   (Community, Territory) | | 1. Expected Start Date   Click or tap to enter a date. | | | | | | | | | | 1. Expected End Date   Click or tap to enter a date. | | | | | | | |
| 1. Project Description: The focus of the project should be clear and demonstrate how an existing opportunity or challenge will be addressed. Please provide answers the following questions. **Please refer to the EOI Guide before answering questions.** | | | | | | | | | | | | | | | | | | | |
| * 1. **Overview:** What is the project? What are the key activities you propose to complete in the project? (See EOI Guide for more details and examples) | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | |
| 1. **Need:** Why is the project needed? Why should it be supported? What gaps will the project address? (See EOI Guide for more details and examples) | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | |
| 1. **Outcomes:** What will be accomplished or produced at the end of the project? Why is it important to your business or organization? (See EOI Guide for more details and examples) | | | | | | | | | | | | | | | | | | | |
| 1. **Benefits:** What are the expected measurable economic benefits of the project? Identify benefits for your business/organization and for the broader economy (these could include your sector, community and/or territory). What are the additional other benefits of your project? (See EOI Guide for more details and examples) | | | | | | | | | | | | | | | | | | | |
| 1. **Prior Work:** Explain and/or attach any work that has been completed in preparation for this project (e.g., business cases, feasibility studies, design studies). (See EOI Guide for more details and examples) | | | | | | | | | | | | | | | | | | | |
| 1. **Partners/Supporters:** Who are the partners or supporters in this project and what is their involvement?(See EOI Guide for more details and examples) | | | | | | | | | | | | | | | | | | | |

| **FORECASTED PROJECT COSTS AND FUNDING SOURCES** | | | | | | | | | |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| 1. Forecasted Total Project Cost | | | **$** | | | | | | |
| 1. Amount Requested from CanNor | | | **$** | | | | | | |
| 1. Forecasted Budget and Anticipated Sources of Funds | | | | | | | | | |
| **Funding Partners** | **TOTAL BUDGET** | **Year 1** | | **Year 2** | **Year 3** | **Year 4** | | **Year 5** | |
| CanNor |  |  | |  |  |  | |  | |
| Applicant |  |  | |  |  |  | |  | |
| Additional Funders (specify) |  |  | |  |  |  | |  | |
| Additional Funders (specify) |  |  | |  |  |  | |  | |
| Additional Funders (specify) |  |  | |  |  |  | |  | |
| Additional Funders (specify) |  |  | |  |  |  | |  | |
| **Total** | $ | $ | | $ | $ | $ | | $ | |
| Have you already **incurred costs** or made **legal commitments** to the project? If yes, please describe. | | | | | | | Yes | |  |
| No | |  |

| **DIVERSITY AND INCLUSION** | | |
| --- | --- | --- |
| The Government of Canada recognizes that many under-represented groups face unique economic challenges. Understanding that participation of underrepresented groups is an integral part of building strong and inclusive communities, and helps the Government of Canada provide inclusive programming to support all groups. Priority may be given to applications that can demonstrate how they support inclusive growth.. If your organization does not align with or support the below groups, or you do not wish to declare your status, leave the fields blank. | | |
| **Underrepresented Groups** | 1. **If applicable, please indicate if your organization is led or majority-led by one or more of the following underrepresented groups:** | 1. **If applicable, please indicate if your project includes or supports one or more of the following underrepresented groups:** |
| Women |  |  |
| Indigenous Peoples (First Nations) |  |  |
| Indigenous Peoples (Inuit) |  |  |
| Indigenous Peoples (Metis) |  |  |
| French Language Minority Communities |  |  |
| Youth (30 years or less) |  |  |
| Persons with Disabilities |  |  |
| Newcomers to Canada |  |  |
| Black Communities |  |  |
| Other Racialized Communities |  |  |
| LGBTQ2S |  |  |
| Others (list) |  |  |

|  |
| --- |
| **PROJECT SUBMISSION AND CANNOR CONTACT INFORMATION** |

**To Submit Your Application and for General Inquiries:** Email: operations@cannor.gc.ca

In the email subject line, use the following format to assist CanNor in processing your application.

Email Subject Line Format**: EIO Application – [Territory (i.e., NU, NWT or YT] – [Organization Name]**

***Example: EOI Application – NU – ABC Enterprise***

# CanNor Regional Offices

|  |  |  |
| --- | --- | --- |
| **Nunavut Region** | **Yukon Region** | **Northwest Territories Region** |
| Iqaluit, Nunavut  Tel: (867) 975-3757 | Whitehorse, Yukon  Tel: (867) 667-3346 | Yellowknife, Northwest Territories  Tel: (867) 669-2608 |