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Section 1: General Information

1.1 Program Overview

Stemming from the Government of Canada's 2023-2028 Action Plan for Official Languages through Canadian Heritage, the VIF Program, which stands for Programme de valorisation d'initiatives francophones (Francophone Initiatives Promotion Program), has as its main objective to fund initiatives that provide young people aged 14 to 30 with opportunities to come together, exchange, support one another, and engage in French **in person.**

Grants for Organizations: this component is intended for larger-scale initiatives led by non-profit organizations (NPOs), particularly those with a regional, provincial/territorial, or national impact.

This funding will support structuring projects related to linguistic security and provide opportunities for participation and engagement for young people aged 14 to 30.

1.2 Program Objectives

The VIF Program aims to:

- Bring TOGETHER young people through activities in French to strengthen their linguistic security and sense of belonging.
- Create EXCHANGES with youth from different linguistic communities to foster cooperation and appreciation of Canada's official languages.
- Increase SUPPORT for the learning and use of French in daily life, especially for youth whose first language is not French.
- **Encourage** youth participation in civic and social ENGAGEMENT in French.

Please note that all projects must meet Objective 1, which is to "Bring TOGETHER young people through activities in French to strengthen their linguistic security and sense of belonging" as well as one or more of the objectives mentioned above.

Section 2 - Eligibility and Requirements

2.1 Eligible Organizations:

To be eligible for funding, your organization must be:

A registered non-profit organization in Canada.

Under the program, legally established Canadian non-profit organizations under federal, provincial, or territorial law are eligible applicants. All applicants must provide thed business number to the Canada Revenue Agency (CRA) at the time of application for funding.

Or

- O A Band Council and
- O Have had an uninterrupted legal existence for at least three (3) years on the date of application and have been active since registration.

2.2 Eligible Projects:

To be eligible for funding under the VIF Program – Grants for Organizations, your project must:

- O Contribute to the program's objectives.
- O Target youth aged **14 to 30** or a portion of this group.
- O Take place entirely in Canada.
- O Take place mainly in person (at least 80% of activities must be in person), although some components can be carried out virtually before or after.
- O Be conducted in French.
- O Directly involve young people; they must play an active role in the project (development, implementation, and evaluation).
- O Be completed by March 1, 2026.

Important:

- An organization may apply for only one project per year, but it may be a partner on other projects.
- If the project already exists, the applicant organization must clearly demonstrate how this grant will enable new results to be achieved.
- The selected organization must sign a grant agreement, participate in the evaluation
 of the project and submit a final report at the end of the initiative, as well as follow-up
 meetings (if applicable) related to the funding received.

2.3 Ineligible Projects:

- Projects that do not meet VIF Program objectives
- Projects whose objective is to organize a fundraiser
- Projects that do not primarily target young people aged 14 to 30 or a portion of this group
- Projects that promote any form of discrimination and/or violate human rights
- Capital projects
- Projects of a religious nature
- Operation of organizations
- Regular collaborative process with no new elements and strategic planning

2.4 Eligible Expenses:

Only expenses related to the implementation of the project are eligible. The categories of expenses covered include:

- Staff salaries and fringe benefits
- Accessibility costs required to enable inclusion of historically marginalized groups
- Equipment
- · Marketing and communication
- Speaker fees and expenses
- Performers' fees
- Refreshments (food and non-alcoholic beverages) for activities
- Venue rentals
- Partnership fees*
- Travel expenses (accommodation and transportation) for project activities
- Evaluation costs (up to 5% of the total amount requested)
- Administrative fees (up to 10% of the total amount requested)

^{*} Under this Program, partnership costs refer to all costs distributed to a partner organization or organizations for the implementation of part of the project.

2.5 Ineligible Expenses:

- Expenses incurred prior to signing the agreement
- Capital costs
- Costs related to activities directly associated with election campaigns, political parties, or partisan activities
- Scholarships

3. Project Duration

Eligible projects must be carried out between June 30, 2025, and March 1, 2026.

4. Amount and Terms of Payment

The eligible budget for a project must be between \$20,000 and \$80,000. The grant may cover up to 100% of eligible project expenses. Unless otherwise specified, 90% of the grant is paid after the agreement is signed, and 10% after the final report is approved.

Under this stream, only projects with budgets between \$20,000 and \$80,000 will be accepted.

5. Accountability:

Final reports must be completed within 60 days after the last project activity is completed within the scope of the grant.

Organizations must:

Participate in a mid-term follow-up meeting to review the progress of the project**

Complete a final activity report.

For projects

^{**} The mid-term follow-up meeting applies depending on the duration of the project.

6. Evaluation Criteria:

Submissions will be evaluated by a selection committee based on the following criteria:

- The project aligns with the objectives of the VIF Program.
- The project addresses the specific needs of the community and mobilizes local resources and knowledge.
- There is a clear link between the stated objectives, the available resources, and the planned activities.
- The project reaches historically marginalized communities or youth who are not often reached.

(If the project aims to reach historically marginalized communities or underserved youth the budget should clearly demonstrate funds allocated to ensure the full participation of these youth.)

- The scope of the project (i.e., the number of young people directly involved in the project).
- The geographical scope and demographic diversity of the project.
- The active role of young people in the different stages of the project

(if the project includes the involvement of youth organizations as partners in the implementation of the project, the budget should clearly show funds allocated to youth organizations for their contributions).

- The organization's proven ability to implement and manage the initiative effectively, with sound governance and adequate skills (or strategies to acquire them).
- Reasonableness of the project budget.
- Measures implemented to promote the participation of both official language communities.

7. Obligation of Funded Organizations

The organization receiving financial assistance agrees to fulfill the following obligations during the term of the agreement:

- Carry out the agreed project, ensuring that eligibility conditions are met.
- Sign and respect the agreement.
- Agree to mention, in all public communications related to the project, that funding was obtained under the VIF Program, in accordance with the VIF Program visibility plan.
- Use and allocate the amounts received exclusively for the purposes of carrying out the activities associated with their subsidized project.

- Agree to repay any amount not used or used for purposes other than those specified in the project.
- Keep, for verification purposes, invoices or all accounting records of all supporting documents relating to the project for a period of five (5) years.

8. Submission of Applications:

Applications must be submitted via the SurveyMonkey Apply platform. You have until June 20, 2025, to complete and sign the various forms.

To be eligible, the application must be completed and accompanied by the following documents:

- The grant application form duly completed.
- The forecast budget form.
- Completed and signed personal declaration.
- Proof that you are a legally registered non-profit organization.
- If applicable, partner organizations must complete a recommendation form confirming their contribution to the project.
- Any other document deemed relevant.

Important: You can find the questions from the form and the budget template in the appendix. <u>Click here</u> if you would like to download the form. Please note that these are provided for informational purposes only. Only applications submitted via <u>SurveyMonkey Apply</u> will be accepted.

To learn more about using the SurveyMonkey Apply Platform, please refer to this user guide.

After the submission:

After submitting your application, you will receive an acknowledgment confirming receipt of your application. Your application will then be reviewed by the selection committee. You will receive a response from the Dialogue Network once a decision has been made regarding your application. All decisions made by the Dialogue Network are final and cannot be appealed.

The selected projects will then be contacted for the next steps

Appendix 1 – Funding application form and expected responses

Instructions: Instructions regarding our expectations or expected responses are provided in italics. This information is provided for informational purposes only and is intended to assist you in completing your grant application. Please note that the way that questions are displayed on SurveyMonkey Apply may differ considerably

Information about the organization		
Organization's legal name *:	Please provide the legal name of your organization.	
Organization's operating name:	Please provide the organization's operating name if it differs from its legal name.	
	Organization's mailing address	
Number * Street name P.O. Box		
City*		
Province/Territory*		
Postal code		
The civic address is the same as t	he mailing address*	
O Yes		
O No		
Please check YES if your mailing addr complete the section below.	ress is the same as your organization's street address. If so, you do not need to	

Organization's street address*	
Number, street name*	
Town/City*	
Province/Territory*	
Postal code*	
Telephone* Extension (optional) Other phone number (optional)	Please enter your organization's phone number here and include the extension if applicable. Important: The phone number must be 10 digits long and in the following format: 123-456-7890.
Organization's email*	Please provide your organization's email address here
Organization's website (If your organization does not have a website, you can provide the link to your Facebook page or other platforms)*.	Please provide the website or link to your Facebook page or other platforms. The website should have a layout like the following site: https:/www.nomdudomaine.xx/

Structure and Governance

Scope of the organization's activities according to your bylaws and regulations*:

- O International
- O National
- O Interprovincial
- O Provincial/territorial
- O Regional/local/municipal

Please select the options that apply to your situation. More than one option may apply.

Please provide proof of incorporation (letter of authorization, municipal, provincial, or federal business registration number)

- Business registration number:
- Provincial
- Federal
- Charity registration number (if applicable)

You must download a document here that proves you are registered in Canada.

You must enter the month and day of the end of your fiscal year here.
You must enter the month and day of the start of your fiscal year here.
You have 500 words to tell us about your organization's mandate, mission, and goals. We encourage you to be concise.
experience and capacity
To help us assess your organization's experience and capabilities, please select the options that apply to your organization. You must select one answer per question.

Name of contact person for this application *

Please select the options that apply to you Number of staff: O 1-9 employee(s) 10-24 employee(s) 25+ Please provide your most recent financial statement*Please download your most recent financial statement. Does your organization have demonstrated Please select the option that applies to your situation. If experience or capacity to work with youth aged you have projects that target only young people aged 14 14 to 30, or a specific segment within this age to 30 or a portion of this age group, please select Yes. If this is not the case please select No. group?: This question will help us assess your experience with O Yes - No youth projects. This question is optional. You can provide us with any Other information (optional): Please information you think is useful for analyzing your organiprovide all essential information (if zation's capacity and experience. applicable): Contact person to provide detailed information regarding the application

Salutation: O Mr.	
O Mrs.	Please select the salutation that applies to you
O Ms.	
ОМх	
Last name	
Title:	
Email address O X I would like to subscribe to the Dialogue Network newsletter.	Please check the box if you would like to subscribe to the Dialogue Network newsletter. This question is optional. You may choose not to subscribe; this will not affect our decision.
Phone Extension (optional) Other phone number (optional)	Please enter the contact person's phone number here and include their extension if applicable. Important: The phone number must be 10 digits long and be in the following format: 123-456-7890

Please select the option that apply to your situation:

- O This person is also an authorized signatory
- O This person is also the contact person for financial notifications

Please select the option that applies to your situation. A signatory is someone who has the authority to sign an agreement on behalf of the organization. A financial contact is someone who will receive financial information about the grant deposit if your application is approved.

Name of the signing person on behalf of the organization* If you have already checked the box above for the signatory, these questions will not appear.		
Salutation: O Mr.	Please select the salutation that applies to you	
O Mrs.		
O Ms.		
ОМх		
First name		
Last name		
Title:		
Email O X I would like to subscribe to the Dialogue Network newsletter.	Please check the box if you would like to subscribe to the Dialogue Network newsletter. This question is optional. You may choose not to subscribe; this will not affect our decision.	
O This person is also the contact person for fin	ancial notifications	
Phone number Extension (optional) Other phone number (optional)	Please enter your organization's phone number here and include the extension if applicable. Important: The phone number must be 10 digits long and in the following format: 123-456-7890	
Name of contact person for	financial notifications *	
Salutation: O Mr. O Mrs. O Ms. O Mx. O None	Please select the salutation that applies to you.	



First name	
Last name	
Title:	
Email O X I would like to subscribe to the Dialogue Network newsletter.	Please check the box if you would like to subscribe to the Dialogue Network newsletter. This question is optional. You may choose not to subscribe; this will not affect our decision.
Phone number Extension (optional) Other phone number (optional)	Please enter your organization's phone number here and include the extension if applicable. Important: The phone number must be 10 digits long and in the following format: 123-456-7890
Information	n about the project
Project title*:	
Project start date (including plan- ning) *	To be eligible, the project must start by the end of June 2025
Project end date *	To be eligible, the project must be completed by March 1, 2026, at the latest.
Is your project a continuation of a project carried out in previous years? * Yes – No	If the project you are proposing is a continuation of a project you have done in previous years, you must select Yes. If you select No, the next question will not appear.
Explain how this funding will add a new dimension or achieve new results.	If you answered YES, you must demonstrate how this funding will enable you to achieve new results or add new dimensions.

Is your project already part of your current programming? * O Yes - No	If the project you are proposing is not a new project and is part of your activity schedule, you must select YES. If this is not the case, you must select NO. If you selected No, the following question will not appear.
Explain how this funding will add a new dimension or achieve new results. If you answered YES, you must demon-	strate how this funding will enable you to achieve new results or reach new dimensions.
Scope of project activities*	You must select the option that applies to your situation:
 National Interprovincial Provincial/Territorial Regional/Local/Municipal 	National (if your project is being carried out across Canada). Interprovincial (if your project is being carried out in two or more provinces). Provincial/Territorial (if your project is being carried out in one province or territory). Regional/Local/Municipal (if your project is being carried out in a region, locality, or municipality).
Project summary*	Provide a short description of your project, making sure to include the following information: project dates, number of participating, project objective.
	If your request is accepted, this information may be used on the dialogue Network website.
Maximum number of v	vords: 150
Project description (objectives and results) Provide a description of your project: objectives, scope, proposed activities (e.g., workshop topics, names of keynote speakers), and expected results (e.g., number and type of events, materials to be developed). Please also specify whether the activities will be virtual and/or in-person. Highlight the innovative aspects of the project if applicable. Please note that to be part of this initiative, at least 80% of your project must be conducted in-person. Any project that does not meet this requirement will be rejected.	You must provide all the information necessary to help us evaluate your project. The objectives must be clear and precise; you must identify the target audience (age, number of people), the names and number of activities proposed, and provide information on the types of events and the results you wish to achieve. It is important that you provide this information in a clear and precise manner. Maximum number of words: 2250

Needs the project aims to address and how these needs were identified*:

You must explain the rationale behind the project and how these needs were identified. If you have conducted a consultation or research on the subject, you may mention this.

Maximum number of words: 600

Objectives and expected results of the program*

Please select the program objectives your project aims to achieve: *

- O Your project must mandatorily meet the following objective: Bringing TOGETHER young people through activities in French to strengthen their linguistic security and sense of belonging.
- O It must also address at least one of the following objectives:
- O Creating EXCHANGES with youth from different linguistic communities to foster cooperation and appreciation of Canada's official languages.
- O Increased SUPPORT for the learning and use of French in daily life, especially for youth whose first language is not French.
- O Encouraging youth participation in civic and social ENGAGEMENT in French.

To be part of this program, your project must involve young people. In addition to this objective, you must also choose one of the three remaining objectives of the program.

Explain how the proposed activities will contribute to the expected objectives of this program:

Please respond to the objectives you selected above.

Each selected objective will open a tab where you will find the table below for each selected objective. You must then answer each line in the table.



Objectives (objectives that would have been selected above)	Indicators	s	How do you plan to achieve these results?	How will the indicators be measured?
The objectives selected above can be found here.	Depending on the objectives, indicators can be, for example, the number of people or the number of events. Indicators can be quantitative (e.g., number of people or number of events) or qualitative (e.g., level of engagement, increased confidence in speaking French).		You must present how you will achieve the selected results.	Here you should mention the means you have/will put in place to measure the indicators you have set. For example, survey, focus group, etc.
Explain how your project will be led by young people, please describe their roles and responsibilities for the funded period.		You must demonstrate that young people will play an active role throughout the project lifecycle (identification, planning, implementation, and evaluation). Please note that the more your project demonstrates that young people play an active role, the more likely it is to receive the maximum number of points for this question. Maximum number of words: 500		
People targeted and directly r	Scope of the project	ect		
Age group			r of persons	
0 – 13 years			-	
14-18 years				
19-25 years				
26 – 30 years				
31 +				

above? (350 words)	selected above. We would like to see measures that go beyond mere representation. Maximum number of words: 350	
What measures will your organization take to promote the participation of the groups selected	Here we expect you to tell us about specific measures you plan to take to ensure the full participation of the groups	
O Other (specify)		
O Remote/rural area		
O Indigenous people (First Nations, Métis and/or Inuit)		
O People with disabilities		
O 2SLGBTQIA+		
O Racialized people		
Select the target group(s) that apply to your project: O Women		
Does your project target histori- cally marginalized groups? Yes – No	If your project is aimed at historically marginalized groups, please select YES. If this is not the case, please select No. This will prevent the following two questions from appearing.	
Total number of youth aged 14 to 30	The amount will be calculated automatically based on the information you entered above.	
Total number of persons	The amount will be calculated automatically based on the information you entered above.	

What measures have been taken by your organization to encourage participation from members of both official language communities? *

Here we expect you to tell us about specific measures you plan to take to ensure the participation of participants from both official language communities. This question allows us to demonstrate your intention to include both communities.

Maximum number of words: 350

Demographic data form

Please provide the scope according to provinces and territories

Provinces and territories	Number of youth	City
Alberta	-	
British-Columbia		
Manitoba		
New Brunswick		
Newfoundland and Labrador		
Nova Scotia		
Northwest Territories		
Nunavut		
Ontario		
Prince Edward Island		
Quebec		
Saskatchewan		
Yukon		
Total		

Important: The number of young people aged 14 to 30 in the first question on the scope must correspond to the number of young people in the geographical scope.

Budget Important: The cost of expenses and income must add up.		
Would you have partners for this project? O Yes	Please select Yes if you have one or more partners for this project and No if you do not have any partners.	
O No	If you select Yes, you will be asked to list the names and roles of the partners in the next question. If you select NO, you will not be able to see the next question.	
	Important: If you select YES, you will be asked at the end to provide the contact details of your partners so that they can complete the recommendation form. The partner(s) will have until june 20 to provide their recommendation.	
List the names of your partners for this project and describe their roles (and, if applicable, the amount that the partners will contribute).	You must list the names of your various partners in the project and describe their roles and responsibilities within the project. Please also provide their contact details so that we can validate their roles.	
Amount requested from the VIF Program	Please enter the amount requested from the VIF Program here.	
Source of funding: Please provide other sources of funding planned for this project, including contributions in kind and private and public funding	You must list the various sources of funding and indicate the status of the funding. If the funding has already been confirmed, you must indicate "confirmed" in the table; if not, you must indicate, "Not confirm."	
,	You must also specify the type of contribution: cash or in kind.	
	For in-kind contributions, you must estimate the cost of the contribution.	
Please provide a detailed budget broken down by expense category	In the budget table, you must provide information for the expense categories that apply to your situation. It is important to provide details about expenses in the description column (if applicable).	

Budget Table:

Estimated Budget									
Name of proj- Description Total ame		ount Status - confirmed/		Types of contribution cash or in kind.	Revenue				
	Describe the type of organizations, funding, or other essential information about this funding	Amount requested - Enter the amount requested from the VIF Program here Enter the amount of the financial source.		Not confirmed Enter the infor- mations if you already have a confirmation of financial source.	Select the type of contributions that may apply to any situation.	List the differ- ent financial sources			
Expenses			Total amount Amount requ		Amount requested from	ested from the VIF Program			
Expenditures									
Salary and benefits									
Professional fees									
Speaker fees									
Venue rental									
Marketing and communication (printing, advertising)									
Project materials									
to one or more pa	refer to any costs of artner organization f a part of the pro	s for the							

Refreshments (food and non-alcoholic beverages)	
Performers' fees	
Evaluation fees (max: up to 5% of the total amount requested)	
Administrative fees (max: up to 10% of the total amount requested)	
Total	Important: The total income must match the total expenses. If it does not, you will not be able to proceed to the next step.

Declaration

I acknowledge that:

- I have the ability and authority to submit this funding application on behalf of the applicant organization.
- I certify and warrant on behalf of the organization and as an individual that the information provided in this funding application and supporting documentation is true, accurate and complete.
- I have read the applicants' guide and understand the program requirements.

Full name		
Title		
Signature		