For Official Use Only:

CSGC # _____ RC No._____

Program: Social Development Partnerships Program – Disability Component

Application for Funding

The funding program to which you are applying has specific eligibility requirements. Your application for funding should clearly show how your proposed project meets these requirements. Also, if you are applying in the context of a Call for Proposal or another time-sensitive process Human Resources and Skills Development Canada (HRSDC), your application must be received by the closing date. Documentation post-marked after the closing date and electronic documentation received after the closing date will not be accepted. Applications submitted by fax will not be considered for funding.

In order to complete this application for funding, please read both of the following thoroughly:

- Applicant's Guide to the Application for Funding. It contains information on how to complete and submit this form; and
- The funding program's information on the website (a link is provided on the Cover Page section of the Applicant Guide)

The application is not considered to be complete unless submitted in its entirety. Failure to provide a complete application may result in the rejection of the application for funding.

All sections marked with an asterisk (*) are mandatory unless otherwise specified.

Thank you for your interest in our program.

PRIVACY NOTICE

The Information you provide in this form is collected under the authority of the Department of Human Resources and Skills Development Act (DHRSD Act) and the Department of Social Development Act (DSD Act) 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.Completion is voluntary; however if you do not complete this form, you will not be considered for funding.

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 HRSDC may be linked. However, these additional uses and/or disclosures of information will not impact on your project.

Your Personal Information is administered in accordance with the Privacy Act, DHRSD Act and the DSD Act. You have the right to the protection of, and access to, your personal information. It will be retained in Personal Information Bank(s) PPU 298.

Canada

Instructions for obtaining this information are outlined in the government publication entitled Info Source, which is available at the following web site address: http://www.infosource. Info Source may also be accessed on-line at any Service Canada Centre.

PART 1 – ORGANIZATION

A. ORGANIZATION IDENTIFICATION			
1. Legal Name* National ME/FM Action Network	2. Operating (Common) Name (if different from legal name*)	3. Business or Registration Number* 891833642 RR 0001	
4. Organization Type* Not-for-Profit	5. Organization Category* Registered Charity	6. Year Established* 1993	
7. Organization Address* 512, 33 Banner Road, Nepean, ON			
8. City or Town* Ottawa	9. Province or Territory* ON	10. Country (if not Canada*)	11. Postal Code* K2H 8V7
12. Telephone Number.* Ext. 613-829-6667	13. Fax Number. 613-829-8518	14. E-mail Address mefminfo@MEFMaction.com	
15. Mailing Address* (if different from Organization Address)			
16. City or Town*	17. Province or Territory*	18. Country (if not Canada*)	19. Postal Code*
20. Telephone Number.* Ext.	21. Fax Number. 1.		

22. Mandate *

The National ME/FM Action Network was founded in 1993 to work on behalf of Canadians with Myalgic Encephalomyelitis/ Chronic Fatigue Syndrome (ME/CFS) and Fibromyalgia (FM). It has been working diligently since then to improve the lives of Canadians with these conditions and to break down barriers to social, education and workforce inclusion for disabled Canadians with ME/FM.

We have done this by bringing stakeholders together, by assembling and/or developing material about the conditions and by providing information and advice to individuals, health professionals, educators, government officials and other interested parties. The National ME/FM Action Network works cooperatively with support groups and other charitable organizations across Canada. It collaborates with organizations in the US and other countries, including the International Association for CFS/ME (IACFS/ME).

The National ME/FM Action Network is the centre of expertise on the issues facing Canadians with ME/CFS and FM in Canada. Our organization has won the respect and loyalty of patients and organizations in this very difficult area. Our founder has received awards from the Governor General and from the International Association for CFS/ME.

Here are some of our accomplishments:

Developing information

* We worked with Health Canada to develop diagnostic and treatment guidelines for ME/CFS and FM. These guidelines were published (2003 and 2004) and provide solid and well respected foundations for the diagnosis and treatment of ME/CFS and FM. These guidelines are summarized in the ME/CFS and FM Overviews (available in English and French).
* We wrote and published the Teach-ME Sourcebook for teachers of students with ME/CFS and FM (available in English and

French).

* We wrote and published a Guide on for people who are applying for CPP disability benefits based on ME/CFS and FM.
* We analyzed data from Statistics Canada's Canadian Community Health Survey (CCHS) and published ground-breaking statistics on the prevalence and impact of ME/CFS and FM in Canada.
* We hosted the 10th international professional conference of the IACFS/ME (Ottawa 2011) bringing together researchers and clinicians from around the world.
* In conjunction with this conference, we hosted a patient information conference with leading speakers. Videos of these lectures are available with English and French soundtracks.
* We provided input into the ME/CFS Primer for Health Practitioners (2012) developed by the IACFS/ME.

Providing information and advice and building dialogue

* We disseminate information through a newsletter, a website, facebook, and email bulletins.
* We have assisted many individuals through our telephone and email help services.
* We have distributed thousands of copies of the Overviews to health professionals across the country.
* We have distributed thousands of copies of the Teach-ME Sourcebook to educators and children's aid societies across the country.
* We have provided material to provincial and local groups for May 12 Awareness Day activities.
* We provided input to the Supreme Court of Canada in a case of wrongful dismissal (granted intervenor status).
* We are participating on the advisory committee of a new clinic for complex chronic diseases in BC.
* We are working with PHAC to bring the Canadian Community Health Survey statistics more widely known though postings on the PHAC website and publications in professional journals.
* We have been in contact with HRSDC, HC, PHAC, CIHR, TBS, STC and the HRC about ME/FM issues.

A common theme has been building dialogue, both within the ME/FM community itself and between the ME/FM community and the broader public.

The website address for the ME/FM Action Network is www.mefmaction.com

Key documents include:

List of Accomplishments:
http://mefmaction.com/images/stories/aboutus/MEFM_ACHIEVEMENTS.pdf

Overviews of the Clinical Case Definitions
http://mefmaction.com/index.php?option=com_content&view=article&id=214&Itemid=263

Teach-ME Sourcebook
http://mefmaction.com/index.php?option=com_content&view=article&id=288&Itemid=356

CPP-Disability Guide
http://mefmaction.com/index.php?option=com_content&view=article&id=425&Itemid=364

IACFS/ME Conference videos
http://mefmaction.com/index.php?option=com_seyret&Itemid=78

CCHS Statistics
http://mefmaction.com/images/stories/quest_newsletters/Quest80springsummer2009.pdf

B. ORGANIZATION CONTACT (*This should be the organization's primary contact person for this funding application.)*

23. Given Name (s)* XXXXXXXXXX		Surname* XXXXXXXX	
24. Position Title* XXXXXXXXXXXX		25. Preferred language of communication* Written: ☒ EN ☐ FR Spoken: ☒ EN ☐ FR	
26. **Organization Contact –Address*** ☐ Same as Organization Address ☐ Same as Organization Mailing Address ☒ Different (include below)			
27. Contact Mailing Address* XXXXXXXXXXXXXX			
28. City or Town* Ottawa	29. Province or Territory* ON	30. Country (if not Canada*)	31. Postal Code* XXXXXX
32. Telephone Number.* Ext. XXXXXXXXXXXXXXX	33. Fax Number.	34. E-mail Address XXXXXXXXXXXXXXXXXXX	

C. ORGANIZATIONAL CAPACITY

35. How many employees does your organization currently have?* No employees. We pay for bookkeeping, auditing and web management services. Other activities are done by volunteers.

36. Has your organization undergone any important transformations in the past two (2) years?* ☐ Yes ☒ No
If 'Yes' please provide a description of the changes:

37. Please describe how your organization has the experience and expertise to carry out the proposed project activities.*

The National ME/FM Action Network is a volunteer organization with contacts and support in all regions of the country. Its Board of Directors is made up of professionals who worked in the public and private sector. We have access to doctors, lawyers, and many other talented people.

The Network has been financially self-sustaining and debt free since its inception.

The Network has taken on a variety of complex projects, including spearheading the development of consensus guidelines for ME/CFS and FM and intervening at the Supreme Court of Canada. Last September, it hosted the biennial conference of the International Association for CFS/ME in Ottawa. The conference was a success both organizationally and financially.

A challenge in this proposal is to ramp up quickly as soon as funding is approved.. The strategy we have chosen is to use a Public Relations consulting company at the early stages of this proposal. The company would already have staff, expertise and bilingual capabilities in place. Our role will be to define terms of reference, to provide advice, and to monitor progress. We have these oversight skills. We also plan to engage the services of an outreach coordinator with clear terms of reference.

38. Does your organization owe any amounts that are in default or in arrears to the Government of Canada?* ☐ Yes ☒ No
If 'Yes', please complete the fields below <u>for each amount owing</u>:*

	Amount Owing	Nature of amount owing (e.g. taxes, penalties, overpayments)	Department or agency to which amount is owed
A.			
B.			
C.			
D.			

39. If an amount is owing, is a payment plan in place? ☐ Yes ☐ No

PART 2 – PROJECT

A. PROJECT IDENTIFICATION	
40. Project Title* Shining a light on the disability of ME/FM	
41. Planned Project Start Date (yyyy/mm/dd)* 2012/10/01	42. Planned Project End Date (yyyy/mm/dd)* 2015/03/31

B. PROJECT DESCRIPTION

43. Project Objectives (must be clearly linked to the objectives of the program to which you are applying).*

While ME/CFS and FM can be extremely disabling, there is very little common understanding of what they really involve. Here is a recent conversation:

* The questions on the disability application form just don't apply to my situation.
* Well then, how would you describe your disability?
* I don't know how to describe my disability.

The first speaker has ME/FM. She can function normally, but only for a short period before she physically runs out of energy, pain builds up and her concentration fades. “Brain-fog” is a term that is often used for the loss of concentration. She can't do any more for the day. She had to leave her career a decade ago. She tried going back part time but that didn't work. She cut out all her social activities. She didn't have much energy for her children. She was, however, fortunate in a number of ways. She had a doctor who knew about ME/FM when she needed one. Her marriage is still together. Her extended family believes her and supports her. She has access to the internet which keeps her connected in a small way. Many people aren't so lucky. Despite her experiences and her advantages, she does not know how to talk to others about her disability. In fact, she even has difficulty acknowledging that she is disabled, something that is common among people with disabilities.

But her first point needs serious consideration. We often find that application forms do not ask the right questions for people with ME/FM and that qualification criteria for services do not give due weight to the types of disability experienced by people with ME/FM. This makes it hard to apply and qualify for services. This is an accessibility issues that won't be resolved until there is a broader awareness and acceptance of ME/FM and a dialogue within the ME/FM community.

People with ME/FM are frustrated. They are frustrated because they are sick and often in pain. They are frustrated because they have difficulty finding medical support. They are frustrated because there are no tests for their illnesses so it is hard to prove that they are really ill. They are frustrated because they are sloughed off on psychiatrists and this is not a psychiatric illness. They are frustrated because well-meaning people, including family, friends, employers, co-workers, teachers, even some health professionals, push them to try harder when that is counter-productive. They are frustrated because they have a

hard time qualifying for the disability services they need and are entitled to. Despite all the frustrations, the ME/FM community shows remarkable resiliance and determination to make positive change.

People in the ME/FM community want to live actively and participate in the community – as actively as is safely possible. A huge barrier they are encountering is the lack of awareness and understanding of their disability.

The National ME/FM Action Network has been working with the ME/FM community for almost 2 decades providing information, advice and, perhaps most importantly, understanding and caring. We knew that there were serious problems around ME/CFS and FM. Even so, we were shocked by the figures from the Canadian Community Health Survey, a major survey conducted by Statistics Canada.

According to the Canadian Community Health Survey, 756,000 Canadians reported a diagnosis of CFS, FM or both in 2010. This is equivalent to the population of 7 federal ridings. Most of the people were of working age, a period in one's life when one is expected to participate in the workforce, the family and the community.

The CCHS also showed that people with CFS and FM have high levels of disability. The percentage of people reporting that they had difficulty performing normal tasks in 2010 was 47% (CFS) and 38% (FM), compared to a general rate of 9%. The percentage of people reporting difficulty in social situations in 2005 was 27% (CFS) and 18% (FM), compared to a general rate of 5%. These illnesses have impact on people physically, cognitively and socially.

The CCHS shows that the ME/FM community is very disadvantaged. Many of our people report low income. Many report being permanently unable to work. Many report unmet home-care needs. Many report that they are food insecure.

One variable was particularly revealing. Survey respondents were asked to describe their sense of belonging to the local community. There were four options from very strong to very weak. The percentage of people reporting a very weak sense was 18% (CFS) and 16% (FM), compared to a general rate of 9%. If there were more understanding, acceptance and accommodation in the community, these rates for CFS and FM would come down.

These statistics confirm that people with ME/FM are seriously disabled and that their needs are not being adequately met.

“I feel as if I am living in a parallel universe. When I talk to the doctor, family members or the school about my daughter, they give me blank looks. When I talk to you, you immediately know what I am talking about.” (Mother of a teenager with ME/FM on an internet forum for parents of young people with ME/FM)

Recognizing the need to open up a dialogue within the ME/FM community and beyond, the objective of this grant application is:

To increase the ability of Canadians with ME/CFS and FM to live as actively as they safely can and to increase their access to disability services by building a dialogue both

* **within the ME/FM community and**
* **across the general public**

about the disabilities caused by ME/CFS and FM.

44. Project Activities (must be broken down into clear steps).*

The key elements of our strategy are to engage the service of a Public Relations company and to engage an outreach coordinator.

PR companies have advised us that the funding is insufficient to do a widespread media campaign. However, there are many important activities that can be undertaken within the budget such as public polling, developing messages, reviewing products and web information, using social media, creating public service ads and building relations with the media. We will explore these possibilities. In this proposal, we focus on developing strategies in year 1, web renewal and media relations in year 2, and media relations and wrap-up in year 3.

At the same time, we will seek the services of an outreach coordinator with a background in disability issues. The coordinator will research the needs of the ME/FM community and investigate the availability of services and supports by jurisdiction. With this background in place, the coordinator will plan a series of workshops across the country for people with ME/FM to discuss the

meaning of disability, the types of supports they need, how to make service providers aware of their needs, and how to make the public aware of their situation. The coordinator will, among other things, consider how to reach people who are homebound and those do not have internet access. While visiting various locations, the coordinator may be called upon to give presentations to a general audience or to specific interest groups.

YEAR 1: For 2012-13, the focus will be on reviewing possible approaches to raising awareness and selecting the most effective ones. We will work with the PR firm to develop a campaign strategy and materials. One particular focus will be putting plans and materials in place for the annual International Awareness Day on May12 and for the Network's 20th anniversary shortly thereafter.

At the same time, we will hire an outreach coordinator. The outreach coordinator will develop workshop and presentation material. Working jurisdiction by jurisdiction, the coordinator will identify active organizations and will review the services and supports offered in that jurisdiction.

Measuring progress:

* effective strategies to develop a common understanding of ME/FM recommended, pieces of the strategy put in place
* outreach coordinator hired, workshop/presentation materials under development and jurisdictional reviews underway

Year 2: The National ME/FM Action Network has very good publications and a very good website. However, the recommended strategies will require the development of new products and additions to the website.

With the assistance of the Public Relations company, the Network will begin developing relationships with journalists across the country. Other recommended strategies will be implemented as resources allow.

The outreach coordinator will hold workshops for people with ME/FM across the country in Years 2 and 3. The coordinator will work through support groups wherever possible. If systemic issues are identified, the coordinator will work with the participants to bring the issues to the attention of the appropriate officials. The coordinator may be called upon to organizeinformation sessions in conjunction with the workshops.

Measuring progress:

* website reflects updated information
* media relations underway
* workshops/presentations held in some jurisdictions

Year 3: Building on what was learned in year 2, the outreach coordinator will work on refining workshop materials and holding more workshops throughout the country. Meanwhile, the outreach coordinator will be available to work with service providers and members of the public who express interest in learning more about ME/FM.

Public awareness activities will be actively encouraged. Funding will be provided for awareness projects including some directed at youth.

Media relations activities will continue in conjunction with the PR company.

Close-out reports will be created by the PR company and the outreach coordinator outlining progress made, issues still of concern and recommendations.

Measuring progress:

* workshops/ presentations have been held across the country
* workshop packages are available for anyone who requests them
* the media are more familiar with ME/FM issues
* dialogue is opening with the broader population.
* project close-out reports have been prepared

45. Expected Results of the Project (must be clearly linked to the project objectives and be specific, concrete and measurable).*

* increased discussion in the ME/FM community
  - measured by the number of workshops held, the number of participants and the volume of feedback
* increased media awareness
  - measured by the number of media articles
* increased awareness in the public
  - measured through a before-and-after survey of the public but also by web hits and enquiries.
* increased networking and partnerships
  - measured by the number of contacts with other organizations
* People with ME/FM will feel more sense of community belonging
  - measured by solicited feedback and ultimately by the Canadian Community Health Survey

.

46. Does the project include Results Measurement indicators?* ☒ Yes ☐ No

If Yes, please describe how you will meet and track the expected results of the project:

See question 45 above.

The National ME/FM Action Network is a results-driven organization. Key indicators of the health of the ME/FM community can be found on Statistics Canada's Canadian Community Health Survey. (Several additional indicators are needed because the scope of CCHS is not complete, notably an indicator for school services for young people and an indicator for housing needs.)

The CCHS indicators for 2005 showed serious issues. See http://mefmaction.com/images/stories/quest_newsletters/Quest80springsummer2009.pdf
We would like the ME/FM indicators around issues like community belonging, food security, income, and access to health and home care to be more in line with those for the general public.

C. PROJECT DETAILS

47. Does this proposed project fit with your organization's other activities?* ☒ Yes ☐ No

If 'Yes', please describe how:

Yes.

The role of the ME/FM Action Network includes, among other things, to provide information about Myalgic Encephalomyelitis/Chronic Fatigue Syndrome and Fibromyalgia, to increase public awareness of the disabilities associated with these illnesses and to work with support groups.

Ongoing activities include the newsletter, the website, email bulletins and facebook, along with our phone/email enquiry service and fundraising. These activities will continue.

48. Will any of the project activities be delivered in a different location than where your organization is located?* ☒ Yes ☐ No

If 'Yes', please complete the fields below for <u>every other location</u> where project activities will occur:

Address	City or Town	Province or Territory	Postal Code
A. Coordination will take place with individuals and groups in all parts of the country			
B. Workshops will be delivered regionally at locations to be decided.			
C.			
D.			
E.			
F.			

49. Is your project designed to benefit or involve people in English or French-language minority communities?* ☒ Yes ☐ No
Please provide an explanation:

Our organization is very aware that many Canadians with ME/ FM are francophone. We are already responsible for having some key documents made available in French, notably the FM Overview, the teacher's sourcebook, the ME/CFS Primer for clinicians, the lectures for patients at the 2011 international conference in Ottawa and the newsletter about the conference.

Campaign and workshops materials will be created in both languages. We will organize French workshops. We will look at the provision of services across the country and in both languages.

50. Will any other organizations, networks, individuals or partners be involved in carrying out the project?* ☒ Yes ☐ No
If 'Yes', please clearly identify the other group(s) or individual(s) as well as the role(s) and expertise they will bring to the project:

Yes, we plan to consult with as many Canadian organizations dealing with ME/CFS and FM and active individuals as possible. For a list of Canadian support groups see our website.

51. Does the project address the program's national, regional or local priorities?* ☒ Yes ☐ No
If 'Yes', please select all that apply:

- ☒ National
- ☒ Regional
- ☒ Local

52. Will your project include any activities that may have an impact on the environment (e.g. construction or renovation; handling, use or disposal of hazardous materials)?* ☐ Yes ☒ No
If 'Yes', please describe the potential environmental impacts and explain how you plan to address them:

PART 3 – FUNDING

A. ANTICIPATED SOURCES OF FUNDING					
53. **Source Name ***	54. **Source Type ***	55. **Cash***	56. **In-kind * ($ value)**	57. **Confirmed* Cash**	**In-Kind**
a) Applicant organization			150000		
b) HRSDC (current request)	Federal government	750000			
c)					
d)					
e)					
f)					
g)					
h)					
i)					
Total Funding for the Project		**750000**	**150000**	**0**	**0**

B. PROJECT BUDGET
(PLEASE REFER TO QUESTION 64 TO PROVIDE ADDITIONAL BUDGET INFORMATION)
(APPENDIX B CONTAINS AN EXAMPLE OF A BUDGET WORKSHEET THAT MAY BE OF ASSISTANCE)

58. **Expenditure Category***	**Planned Expenditures ($)**		
	59. **HRSDC***	60. **Other – Cash***	61. **Other - In Kind***
A. Wages and Benefits			
a) Project Staff Salaries			150000
b) Benefits (Mandatory Employment Related Costs (MERCS)			
Total Wages and Benefits			150000
B. Capital Costs			
a) Capital Assets			
Total Capital Costs			
C. Project Overhead (Activity) Costs			
a) Professional Fees	490000		
b) Travel and Accommodation	50000		
c) General Project Costs	210000		
Total Project Activity Costs			
D. Total Project Costs (A+B+C=D)	750000		150000

Has this budget been approved by your Board of Directors? (Yes or No).* If no, please explain: **Yes**			
***NOTE: HRSDC funding is limited to $250,000 per fiscal year for a maximum of three years.**			

62. Associated Businesses or Individuals: Please check all statements below that apply to your planned expenditures of HRSDC funding:*

☒ contracts valued at $25,000 or more are part of the planned expenditures
☐ contracts with businesses or individuals legally associated with the applicant organization are among the planned expenditures
☐ contracts with outside providers to manage all or part of the project activities on behalf of the applicant organization are among the planned expenditures

63. Capital Assets: Will capital assets be among your planned expenditures with HRSDC funding?* ☐ Yes ☒ No
If yes, please explain the benefit of the purchase(s) that are necessary to carry out the project activities:

64. Further Budget Details: Please provide further details about your project budget below.

YEAR 1

* Network expenses $ 40k
  - travel, recruiting, printing, translation, admin etc.
* Project coordinator service $ 35k
* PR Consulting services $175k
* Services-in-kind $ 30k

YEAR 2

* Network expenses $ 30k
* Project coordinator service $ 80k
* PR Consulting services
  (including website update and media relations) $ 80k
* Workshop expenses $ 60k
* Services-in-kind $ 60k

YEAR 3

* Network expenses $ 30k
* Project coordinator service $ 80k
* Workshop expenses $ 60k
* PR Consulting services $ 40k
* Funding for special awareness projects $ 40k
* Services-in-kind $ 60k

PART 4 – DECLARATION

In order for your application to be eligible for funding, it must be completed and signed by the official representative(s) of the applicant organization in accordance with the organization's statutes or by-laws or other constituting documents. The person(s) signing this form declare(s) the following:

A. I declare that I have the capacity and that I am authorized to sign and submit this Application on behalf of the Organization named in Part 1;

B. I declare that the information provided in this Application and supporting documentation is true, accurate, and complete to the best of my knowledge; and

C. I declare that the Organization and any person lobbying on its behalf is in compliance with the *Lobbying Act, R.S.C., 1985, c. 44 (4th Supp.)* and that no commissions or contingency fees have or will be paid directly or indirectly to any person for negotiating or securing this request for funding.

Margaret Parlor	President		2012-08-20
Signatory Name (please print)	Title (please print)	Signature	Date (yyyy-mm-dd)
Signatory Name (please print)	Title (please print)	Signature	Date (yyyy-mm-dd)
Signatory Name (please print)	Title (please print)	Signature	Date (yyyy-mm-dd)

Appendix A

Instructions: For each block of text you include below (if any), please specify the section it pertains to.

e.g. Part 1, Section 1C, Question 36 – continued: insert the rest of your answer here.

n/a

APPENDIX B: Budget Worksheet

This is provided as an example to assist you in preparing your detailed budget.
Use a separate page for each fiscal year of your project.

PROJECT COST CATEGORIES	Year		
	HRSDC Funded Amount	**Non-Federal Govt Amount**	**Total**
1. Wages, Benefits and Mandatory Employment-related Costs (MERCs) for project staff (Workers' Compensation Benefits, medical, dental, pension, etc where warranted by current organizational Human Resources policies)			
A. Wages Specify Position(s) and Amount for each employee (hours per week x $ per hour)			
Wages – Subtotal A			
B. MERCS for project staff Specify position and amount for each employee (hours x $/hr x $11.37%) (CPP: 4.96%, EI: 2.42 %, Vacation Pay 4% = 11.37%, depending on province)			
MERCs – Subtotal B			
Subtotal – Wages, benefits & MERCs (A+B)			
2. Capital Costs Specify each asset separately			
GST paid on capital assets eligible for reimbursement through HRSD			
Capital Costs—Subtotal			
3. Project Overhead (Activity) Costs			
C. Professional Fees (e.g. bookkeeping, translation services, information technology, equipment maintenance, security, audit costs, legal fees) Itemize each type of service and amount; per diem or hourly/monthly rate for each			

Professional Fees – Subtotal C			
D. Travel and Accommodation Costs Include transportation costs (air or train fares, taxis, kilometric charges, etc), accommodation, meals and per diem for each project employee or contractor			
Travel and Accommodation Costs – Subtotal D			
E. General Project Costs Itemize and cost all applicable to your project			
GST paid on professional fees, travel costs and general costs eligible for reimbursement through HRSD			
General Project Costs – Subtotal E			
SUBTOTAL OF PROJECT OVERHEAD COSTS (Professional Fees + Travel + General Project Costs (C+D+E)			
Total Project Cost (1+2+3)			

TOTAL COST DISTRIBUTION			
CANADA	**Non-federal Govt Contribution**		**TOTAL**
%	%		100.0%