

COMMUNITY TRAINING TRUST SOCIETY

FUNDING APPLICATION

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Name of First Nation, Municipality, or other Local Government:

Contact person:

Position:

Mailing address:

Phone:

Fax:

Email:

Name of course / purpose of training:

Please attach details with your application

Have participants taken this course before, and if so why are they retaking this training course?

Method of training:

Location of training:

Date(s) of training:

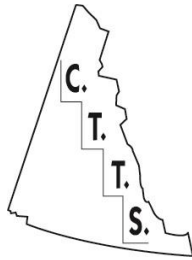
ANSWER ONLY IF THE COURSE IS OUTSIDE OF THE YUKON

Is there a comparable course in the Yukon?

What actions did you take to determine this?

Name of participants and positions of those attending from your Organization:

Expected benefits to the community (if space is lacking, please append to your application):



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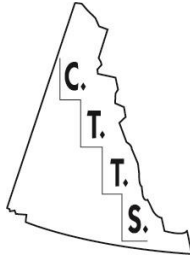
PROPOSED BUDGET

PROJECTED EXPENSES	PROPOSED EXPENSE
COURSE REGISTRATION FEE	
TRAVEL COSTS	
Airfare	
Personal vehicle (approved rate/km)	
Employer vehicle (\$0.30/km)	
MEALS (approved daily rate or projected costs)	
ACCOMMODATION	
DAILY INCIDENTALS	
TAXI FARE (or other local transportation)	
PARKING	
OTHER: please specify:	
TOTAL PROJECTED EXPENSES	

Funding provided by your Organization	
Funding requested from CTTS (max 2/3rds)	
TOTAL REVENUE	

REMINDERS

- These are only projected expenses, not the true costs which will be determined later.
- The maximum requested funding from CTTS is \$3000.00.
- Please round your projected expenses to the nearest dollar.



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SIGNATURE OF LOCAL GOVERNMENT BODY OFFICIAL

DATE

*"a person who has been properly authorized
and empowered to enter into and execute this
agreement on behalf of the requesting party."*

NAME

POSITION

SUBMIT COMPLETED PACKAGE TO:



(867) 668 - 7574



**Community Training
Trust Society**

P.O. Box 31314
Whitehorse, YT, Y1A 5P7



ayc@ayc-yukon.ca