



Letter of Support Request Form

The Town of High River supports groups and organizations seeking support from Council for grants, awards, recognition, and other endeavours. Please refer to the Town's Letter of Support Policy for details regarding the process for requesting letters of support.

Requestor's Information	
Date of Request	
Date Letter of Request Required By	
Name of Group/Organization	
Full Name	
Mailing Address	Town/Province
Phone Number	Postal Code
Email Address	

Affiliation with High River
Please briefly explain your group or organization's connection to High River.

Overview of Request

Please provide a brief statement of the request being proposed, including how this project, initiative or program will benefit the overall community. Please attach a separate sheet if required.

Grant Information

Are you applying for grant funding?

Yes

No

Name of Grant

Amount of Funding Requested

Grant Due Date

Grant Organization

Mailing Address

Town/Province

Phone Number

Postal Code

Email Address

Town Owned Properties or Facilities

Are you applying for grant funding that will be applied towards a Town owned property or facility?

Yes

No

Location of Property/Facility

Is Community Economic Development currently assisting you with your project, initiative or endeavour? If not, please note that all requests that have a financial implication for the Town must be reviewed by the Community Economic Development division prior to going to Council.

Yes

No

Financial Implications

Please explain any initial or ongoing costs required from the Town of High River in relation to this request and provide any forecast of anticipated costs. Please attach a separate sheet if required.

Please attach any additional information you may have, including a detailed list of other funding partners, supporting letters, documents, or materials.

Please submit all completed forms and supporting documentation to:

Town of High River Council
 c/o Manager of Legislative Services
 309B MacLeod Trail SW
 High River, Alberta T1V 1Z5
 Email: legislativeservices@highriver.ca

_____	_____
Applicant Signature	Date
_____	_____
Signature of Parent/Guardian (if applicant under 18)	Date

FOIP Disclaimer: Personal information required within the Town of High River application forms are collected under the authority of Sections 33(a) and (c) of the *Freedom of Information and Protection of Privacy (FOIP) Act*. This personal information will be used to process your application(s). By signing this document, you are consenting to the release of this information in accordance with Sections 17(2)(g) of the Act and that your name, address, and other details related to your request may be made available to the public and published on a Regular Council Meeting Agenda. Should you have any questions related to the collection or disclosure of your personal information, please contact the Legislative Services division for the Town of High River at 403.652.2110.

For more information regarding the privacy considerations, please review the Privacy Notice section in the Town's Letter of Support Policy.

Office Use Only

Action Item			Date Completed
Acknowledgement of Request Sent	Yes	No	
Review for Financial Implications	Yes	No	
Application sent to Community Economic Development (Financial implications)	Yes	No	
Schedule for Council/Delegation (as required)	Yes	No	
Applicant Informed of Outcome	Yes	No	