



Sustainable Canadian Agricultural Partnership

Competitive. Innovative. Resilient.

Indigenous Agriculture and Relationship Development Applicant Information Form

When submitting this Applicant Information Form, please note the following:

1. If this is the first time applying for the Indigenous Agriculture and Relationship Development Program, the appropriate Application Worksheet is required to be completed in addition to this Applicant Information Form. Both documents are required to be submitted together.
2. For all subsequent funding requests under the Indigenous Agriculture and Relationship Development Program, only the Application Worksheet is required to be completed and submitted.

Applicant Information

Legal Name of the Business, Organization, Municipal Government or the Indigenous Business, Organization, Community or Government

Last Name		First Name
Role or Position with Business or Organization or Community		
Mailing Address (Street and/or Postal Box Address)		Village/Town/City
Province	Postal Code	Primary Phone Number
Primary Email		

Registered Organization Information

Are you registered with the Manitoba Companies Office (or another legally registered body)

	Registry Number	Status
If yes , enter your Registry Number and Status		

Payment and Tax Information: please fill in only one of the following options

Enter your unique 9-digit Business Number (BN9) or GST Number

Enter your unique 9-digit Social Insurance Number (SIN)*

***Complete the SIN field ONLY if you are applying as a sole proprietorship or partnership that reports this entity's income as part of your personal income tax return.**

Recipient Type: complete either Section A or Section B

Section A: Complete information below if you identify as a **non-Indigenous** entity

If you selected **Other Industry Organization**, describe below

Section B: Complete information below if you identify as an **Indigenous** (First Nations, Métis, or Inuit)

If you selected **Indigenous-led Group**, describe how the group supports Indigenous communities as well as the composition of staff, voting members, shareholders, board of directors, etc.

Gender Based Analysis Plus: select all that apply, at least one box must be checked

<p>1. Is your business or organization majority owned (or majority represented) by one or more of the following?</p> <p>Or</p> <p>2. Does your organization's Board of Directors have a diverse composition with significant representation (30% or more) from one or more of the following groups?</p>	<p>Indigenous People</p> <ul style="list-style-type: none">First NationsMétisInuitUnknown <p>Women</p> <p>Youth (under 40)</p> <p>Not applicable</p> <p>Decline to identify</p>
<p>Your response is for information purposes only and will not affect the assessment of the application</p>	

Privacy Notice and Declaration

The Department of Agriculture (“Manitoba Agriculture”) is collecting Applicant information, which may include personal information, under the authority of clause 36(1)(b) of The Freedom of Information and Protection of Privacy Act (“FIPPA”) as the information relates directly to, and is necessary for, determining and verifying Applicant eligibility for programs administered under the Sustainable Canadian Agricultural Partnership (“Program”).

Manitoba Agriculture is authorized to use information, which may include personal information, under the authority of clause 43(1)(a) of FIPPA, for the purpose of determining and verifying Applicant eligibility for the Program.

Manitoba Agriculture is authorized to disclose information to the Government of Canada, which may include personal information, under the authority of clauses 44(1)(i) and 44(1)(x.1) of FIPPA, in order to facilitate the monitoring and evaluation of a shared cost program or service.

All personal information collected by Manitoba Agriculture is protected under FIPPA. Personal information cannot be used or disclosed for any other purpose, unless consent is provided or the disclosure is authorized or required under FIPPA.

Should you have any questions about the collection, use or disclosure of personal information, contact the Access and Privacy Co-ordinator at 204-945-4823.

This Declaration must be completed by a duly authorized representative of the Applicant.

Checking the boxes below indicates acceptance and is required.

The Applicant represents and warrants that no Manitoba government employee holds a 50% or more ownership interest in the business or organization that is applying for funding.

The Applicant represents and warrants that no current or former member of the Legislative Assembly of Manitoba holds an ownership interest in the business or organization that is applying for funding.

The information provided in this Applicant Information Form is complete, true, and accurate.

The Applicant undertakes and agrees to notify the Program Administrator promptly by e-mail at agriculture@gov.mb.ca or by phone at 1-800-811-4411 if there is any change in the information provided in this Application Information Form.

	Date Applicant Information Form completed and submitted (YYYY – MM – DD)
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Submit form with associated documents together by email to agriculture@gov.mb.ca

For more information, contact agriculture@gov.mb.ca or call 1-800-811-4411.

<p>To save the form, please click on the SAVE button and save the form to your desktop (or anywhere else on your computer)</p>	
<p>If the form is complete, and you are ready to submit, please click on the SUBMIT button and the form will be attached to a new email. Please note that if any field with a red border is left blank, the form cannot be submitted</p>	