

INSTRUCTIONS

This form must be completed electronically and sent by email to donation@lbcfg.ca. You can include information on the organization's activities or any other documents supporting your request. Requests for donations are reviewed on a quarterly basis. However, you can submit requests at any time during the year. Only organizations whose applications qualify will be contacted.

Date :

GENERAL INFORMATION ABOUT THE ORGANIZATION

Organization Name:

Contact Name: **Phone number:**

Title: **Email Address:**

Address:

City: **Province:** **Postal Code:** **Country:**

Organization Mission

Please provide a brief description of your activities.

Organization's focus area(s)—Select all that apply

☐ Education, Professional Development and Mentoring ☐ Community Involvement and Access to Social Services ☐ Support for Entrepreneurs ☐ Access to Employment ☐ Support to New to Canada and Refugees ☐ Financial Education

Geographical area covered

☐ local ☐ regional ☐ national

Are you a registered charity or non-profit organization? ☐ yes ☐ no

Federal business no. (BN)/Registration Number:

Year:

Has your organization received support from Laurentian Bank in the past? ☐ yes ☐ no ☐ I don't know

If so, when did Laurentian Bank last support your organization? Please be as specific as possible.

Year: **Amount: \$**

Are you currently supported by any of these organizations?

☐ United Way ☐ Canadian Red Cross ☐ HealthPartners Quebec

Is your organization affiliated with another organization (including political organizations) ☐ yes ☐ no

If so, which organizations and how are they involved?

Do you have major donors? ☐ yes ☐ no

Please list the names of your major donors:

INFORMATION THE DONATION REQUEST

What is the purpose of your donation request? Please provide with the form of any document that is relevant for the request. Please note that event sponsorships are not included or covered by this corporate program.

☐ project and/or program ☐ organization's daily operations

Describe the project and/or program or the operational activities requiring support.

What kind of support are you looking for? Select all that apply.

☐ Financial support. Please specify the amount: \$

☐ Volunteering support. Please specify the volunteering support you need

☐ Other support. Please explain the support you need

Donation required by (date):

Is this a multi-year agreement donation request? ☐ yes ☐ no

Please provide any other relevant information that will help us understand why Laurentian Bank should support your organization. *(Limit of 800 characters — 150 words).*

Do you have personal or business relationships with Laurentian Bank employees or board members? If so, please disclose.