



APPLICATION FORM

FUTURE PARALYMPIANS GRANT 2026-2027



Application form

GENERAL INSTRUCTIONS

Before Completing Your Application:

1. Read through the Future Paralympians Grant Guidelines available at: <https://paralympic.ca/funding-opportunities> and ensure your organization meets the basic eligibility requirements.

When you are ready to apply:

Please read each question carefully and answer completely. There are four main sections to complete as well as required documents to provide:

2. **Part A:** Organizational Information should be filled out with details pertinent to your organization or club.
3. **Part B:** Project Information should be filled out with details about the specific program or initiative that will use the funding.
4. **Part C:** Financial Information should include both funding allocated from CPC as well as organizational or external sources (if applicable). You are required to distinguish how CPC funding will be used.
5. **Part D:** The application main contact should complete the application checklist and sign on behalf of the organization.
6. Prepare your organization's financial statement summary from the most recently completed operational year, or a letter of endorsement from your organization's financial representative.

When you are ready to submit your application:

7. Upload the completed application, along with financial statements, the letter of endorsement and other supporting documents if applicable (yearly training plans) to the online form available at <https://paralympic.ca/funding-opportunities>. Please ensure all documentation is complete before submitting the online form.



PART A: ORGANIZATIONAL INFORMATION

- 1. Organization Name:**
- 2. Eligibility of Organization:**
- 3. Parasports offered by your organization (List all that apply for both summer and winter sports).**
- 4. What is your organization's mandate and mission? Provide 1-2 sentences from an existing organizational constitution, or a brief description of why your organization exists:**



5. Describe your organization's typical activities including programs and resources. When describing your activities, please make specific mention of the organizations you regularly partner with.

Note: You can include activities for both para and non-para-athlete programming but be sure to distinguish which is which.



6. Who participates in your organization's activities or programs? Please describe your membership. Provide an approximate breakdown of membership by: age, role (athlete, coach, sport assistant etc.), impairment type (visual/sensory, physical or intellectual), level of training/competition, etc. If you are applying for funding for an individual athlete or training group, you will be asked for more details on their training plan later in the application.

Note: You may include members for both para- and non-para members but be sure to distinguish which is which. Be honest about your numbers: The Review Team has a strong understanding of the Para sport environment and understands that low numbers do not necessarily reflect the strength or quality of the program.



PART B: PROJECT INFORMATION

7. Project Name:

8. Sport(s) included in your project:

9. Anticipated Project Start and End Date:

10. Select all the funding categories that apply to your project. Be sure to refer to these categories in your project description in Question 12.

- (a) Enhanced Training Environments
- (b) National Para Development Camps
- (c) Coach Enhancement

11. Please indicate which grant amount you are applying for: \$10,000, \$15,000, \$20,000.
Only one amount may be selected.

- \$10,000
- \$15,000
- \$20,000



12. Describe the program or initiative for which you will be using the funding. Please include the following information:

- *Main goal and key activities of the initiative, including anticipated timelines for each activity*
- *Your sport-specific Paralympic developmental plan or tailored coach education plan.*
- *Anticipated number of athletes and/ or coaches impacted*
- *Any external coaches, mentors, or technical leaders who will be involved*
- *How you plan to sustain the initiative beyond the time frame of the funding*



13. What are the expected outcomes of this initiative and how will you measure success?

Outcomes can be qualitative or quantitative in nature but must be measurable. Examples of measurement tools could include program registration tracking, % increase in participants, participant surveys, testimonials, etc.

EXPECTED OUTCOMES	HOW WILL YOU MEASURE THE OUTCOME?



14. Please include a list of athletes or coaches, as well as their position on the sport-specific Paralympic pathway.

*** If you are submitting an application for a large group of athletes or coaches, please include a full list in a separate document (example: Excel).**

NAME	STATUS / ROLE / PROFESSION	AGE	POSITION ON PARALMYPIC PATHWAY
<i>e.g. Mico Cortina</i>	<i>Athlete</i>	<i>16</i>	<i>In our talent development program</i>
<i>e.g., Los Angeles</i>	<i>Coach</i>	<i>N/A</i>	<i>Coaches our talent dvelopment program. NCCP Performance Coach</i>



PART C: FINANCIAL INFORMATION

Please detail your entire project budget but be sure to separate expenses that will be covered by CPC and those that will be covered by additional revenue sources. Projects with diverse revenue sources may receive a higher priority for funding. Applicants may attach their own budget template for the project but must include the same level of detail as the one below.

REVENUES	BUDGET
<i>Insert all revenue sources:</i>	Amount
CPC Future Paralympians Grant	\$
	\$
	\$
	\$
Total Project Revenues	\$
EXPENSES	BUDGET
<i>Insert all project expenses:</i>	Amount (\$)
Expenses to be covered by CPC Funding:	
<i>Example: Coach salary 25hrs @ \$25/hr (CPC Grant)</i>	\$625
	\$
	\$
	\$
	\$
	\$
	\$
	\$
Total Expenses (covered by CPC)	\$
Expenses to be covered by additional funding sources:	
	\$
	\$
	\$
	\$
	\$
Total Expenses (covered by additional revenue sources)	\$
Total Project Expenses	\$



PART D: FINAL CHECKLIST

Please ensure that the following documentation is completed and uploaded to the online application form.

I have reviewed the grant guidelines, and my application is eligible under 2026-2027 Future Paralympians Grant Guidelines.

I have notified my NSO of my program or initiative, and they have given their endorsement that it is aligned with the sport-specific Paralympic pathway. Please note that applications will be reviewed by the respective NSO.

The Future Paralympians Grant application form is complete

A financial statement summary from the most recently completed operational year, or a letter of endorsement from your organization's financial representative is complete (such as a treasurer).

- Yes
- No

I _____ (Name of Key Contact) confirm on behalf of
_____ (Name of Organization) verify that the information submitted in this
application is factual.

Signature _____

DATE _____