



8301 – 110 Street
Grande Prairie AB T8W 6T2
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Indigenous Populations Grant Application for Financial Assistance

Library Name: _____ Date: _____

Authorized Signature: _____

Project Description:	
Target Audience:	
Facilitator/Instructor:	
How will the program incorporate Indigenous culture(s) and/or promote reconciliation?	
Program Completion Date:	Estimated Cost:

- NOTES:**
- 1. Programs must expand library services to Indigenous communities, attract new patrons from those communities, or build cultural awareness with non-Indigenous residents.**
 - 2. Once the project is complete, you must submit an expense claim form along with your receipts. Reimbursement will be made within one month of PLS receiving the claim.**
 - 3. You will be asked to report back to PLS on the results/success of your project.**

FOR PLS OFFICE USE

Peace Library System Authorized Signature: _____ Date: _____