

PURPOSE OF A TOBACCO REDUCTION GRANT

Vancouver Coastal Health (VCH) Tobacco Reduction Program is excited to announce new grants for new or existing **youth-run and/or youth-focused** tobacco reduction initiatives. Grants will range between \$500 - \$700 per school year (September to June).

WHAT IS A “TOBACCO REDUCTION INITIATIVE”?

A tobacco reduction initiative is any sort of project, event or activity that increases youth leadership and engagement in **preventing youth from starting to smoke, helping youth to quit smoking or protecting youth from the harmful effects of second-hand smoke.**



Some areas of focus could include...

Addressing influences of the tobacco industry, smoking in movies and advertisements, flavoured tobacco, and e-cigarettes/vaping.

Some examples of activities could include....

Organizing a stress-free exam week, conducting a mindfulness workshop with focus on tobacco use, smoke-free movies advocacy, starting a smoking cessation group, making a commitment to abstain from tobacco, or making your sports organization or housing complex smoke-free.

WHO CAN APPLY FOR FUNDING?

To apply, you must be either:

- A school or a community-based organization working within the Vancouver Coastal Health Region (within City of Vancouver, Richmond, the North Shore, Bella Coola, Bella Bella, Powell River, the Sunshine Coast, and Sea-to-Sky communities).
- A group of youth sponsored by and part of a school or a community-based organization. If this is the case, please speak to and provide your adult sponsor contact info in the space indicated in the application form. Your adult sponsor should be willing to assist you with your project as needed. If selected, your school or your organization will receive the grant money first and then make it available to your group to implement your initiative.

THE FINER PRINT...

- Funding is not intended for administrative purposes, profit-making purposes, replacing funds already allocated to existing projects or for capital expenditures.
- Funded applicants must complete a final grant evaluation once their initiative has been completed or by May 20, 2017.
- Your initiative must be completed by May 15, 2017.

Don't Forget!

Only completed applications – submitted in the following template format – by the deadline will be reviewed.

2016/2017 Application Form

SUBMISSION DEADLINES: October 15, 2016 & December 15, 2016 AT 4:30PM

Mail: Community Investments
Vancouver Coastal Health
232 - 520 West 6th Avenue
Vancouver, BC V5Z 1A1
Email: community.investments@vch.ca
Fax: 604-874-7518

Note: For October applications, applicants will be informed of the decision by October 31st.
For December applications, applicants will be informed of the decision by January 6.

1 | APPLICANT INFORMATION:

Youth Group Information (if applicable)			
Name of Youth Group:			
Names of Youth Group Members:			
1 st Lead Member of Youth Group:	Name	Phone #	Email
2 nd Lead Member of Youth Group:	Name	Phone #	Email
Adult Sponsor:	Name	Phone #	Email

2016/2017 Application Form

School/Organization Information (if applicable)		
Name of School/Organization:		
Mailing Address:		
City/Province/Postal Code:		
School/Organization Contact Person:	Phone #	Email
Has your school/organization participated in a tobacco reduction initiative before? If so, please provide a brief description (what, when, where, why, how, and outcome?).		

2 | INITIATIVE INFORMATION:

Brainstorming Space

Use the next page to create a vision of your tobacco reduction initiative. Brainstorm ideas of how you plan on achieving this initiative.

Name of initiative



Goals, objectives & action plan

Who will participate?

Who can we ask if we need help?

How will we measure the successes and challenges?

How can we continue the project after the funding?

How will we get our school and/or community involved?

Brainstorm Area...

2016/2017 Application Form

f. How do you plan on achieving the goal(s) and objectives(s)? Please provide a timeline, from beginning to end.

Activity	Date Completed

g. How will you evaluate the initiative? How will you measure the success(es)?

h. What are some potential challenges to this initiative? How do you plan to overcome these challenges?

2016/2017 Application Form

i. Who will be involved with this initiative from your school/community?

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j. How will you make the school or community aware of and involved in your initiative?

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k. How will you keep a record of your initiative? (I.e. taking pictures, writing a story or article, etc.)

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l. How do you plan to celebrate your efforts and successes (i.e. hold an assembly, awards ceremony, party, etc.?)

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m. Do you have any plans to continue the initiative after this funding? If so, how?

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3 | BUDGET

Tell us how you plan to spend your grant. **Please include a brief description as to why you feel this expense is necessary in the notes section.** Keep in mind grants will range between \$500 and \$700.

Expenses (Things you will need)	Cost	Notes
Total	\$	
Other funding sources	\$	(Please describe other source(s) of funding and purpose of funding.)