



Community Food Action Initiative 'Improving Local Food Security'

LETTER OF INTENT APPLICATION

Purpose

The Vancouver Island Health Authority's (VIHA) Community Food Action Initiative (CFAI) request for a Letter of Intent is intended to provide communities and VIHA an opportunity to collaborate on long term planning for Food Security.

The Letter of Intent provides information to VIHA prior to entering into a formal written agreement. It also signifies the parties' commitment to partnering and engaging in community processes.

The Letter of Intent itself is not a legal contract nor is it legally binding.

Instructions

1. Please choose the funding category or categories involved in your Letter of Intent Application.

Categories include **(A) Developing a CFAI Capacity Building Plan** of \$6,000 or less, **(B) developing a CFAI Community Plan** of \$10,000 or less, **(C) Implementing a CFAI Plan** of \$20,000 or less, and, **(D) Early Implementation of Promising Practices or Approaches** of \$10,000 or less.

2. Please attach your CFAI 2009/10 Application Page (page 4 of the CFAI Package) with your Letter of Intent.
3. Please provide a brief outline of your multi-year project containing the following information:
 - 3.1 Introduction to your organization;
 - 3.2 Statement of the issues or community priorities that the project will specifically address each year;
 - 3.3 A concise description of the activities to be undertaken;
4. Using the following table, please insert the dollar amount requested to VIHA and other



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sources, specifically related to your project. Please specify Requested (R) or Confirmed (C). Note: At a later date we may request an itemized budget detailing additional items e.g. revenue.

Source of Funds	\$ R/C 2009/10	\$ R/C 2010/11	\$ R/C 2011/12	\$ Total Requested	\$ Total Confirmed
				\$0.00	\$0.00
				\$0.00	\$0.00
				\$0.00	\$0.00
				\$0.00	\$0.00
				\$0.00	\$0.00
				\$0.00	\$0.00
Total	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00

4.1 To assist us with the decision making process please consider including justification, rationale, and objectives for the amount and duration of the funding request.

4.2 How will you use this funding to leverage other funding opportunities?

5. Signature

Name of Applicant:

Position of Applicant:

Signature of Applicant:

Date:

6. Please provide **six copies** (double sided if possible) of your Letter of Intent and mail / courier or deliver in person to: Jarrod Gunn-McQuillan, Public Health, VIHA, Suite 415 - 1900 Richmond Ave., Victoria, BC V8R 4R2.

7. The status of your Letter will be communicated to you in writing after your current CFAI Application is processed. The complete proposal (including copies) must be received by **4:00 pm (by mail/courier or in person) on May 12, 2009.**

We look forward to working with you. Should you have any additional questions or suggestions please phone Jarrod Gunn-McQuillan at 250.519.7043 or e-mail: jarrod.gunnmcquillan@viha.ca