**2025-2026 EDUCATION GOVERNANCE GRANTS:**

**LETTER OF INTENT**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Name of First Nation:** | | | **Primary Phone:** | | |
| **Contact Name:** | | **Email:** | | | |
| We would like to access our governance capacity development grant |  | We have adequate funding available, and we do not intend to access this grant | | |  |
| **If you want to access your grant, amount requested** *(must not exceed the amount sent to you through DocuSign)* | | | | $ | |
| **Activities to be undertaken (please check all that apply, and provide a description of the related activities)** | | | | | |
| Developing or reviewing the Governing Authority’s structure or operations. *Please describe.* | | | | |  |
| Strengthening the capacity of governance or education leaders. *Please describe.* | | | | |  |
| Building capacity for working with education partners. *Please describe.* | | | | |  |
| Developing or updating community education and/or First Nation school policies / plans. *Please describe.* | | | | |  |
| Enhancing family engagement for education transformation. *Please describe.* | | | | |  |
| Promoting community involvement in education. *Please describe.* | | | | |  |
| Succession planning / building the capacity of future education governance leaders. *Please describe.* | | | | |  |

|  |  |
| --- | --- |
| **Total Planned Budget Expenditures** | **Cost** |
| Meeting costs (including facility rentals, meeting rooms, audio-visual, hospitality, childcare, etc.) | $ |
| Project Coordinator/other short-term staff for program implementation (*please indicate the FTE or hours required*) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | $ |
| Elder honoraria | $ |
| Professional / consulting fees (*please briefly describe the purposes and the days / hours to be funded*) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | $ |
| Legal fees (excluding litigation) (*please briefly describe the purposes and the days / hours to be funded*) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | $ |
| Materials / supplies (please briefly describe) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | $ |
| Other (please describe) | $ |
| Other (please describe) | $ |
| Other (please describe) | $ |
| Sub-total | $ |
| Admin fees: (not to exceed 5% of the total costs) |  |
| **Total Budget** | **$** |

**REQUIRED**

|  |  |
| --- | --- |
| Name of First Nation representative (e.g. Education Director / Coordinator, Band Manager, Chief or Councilor, etc.) confirming support for the activities outlined in this Letter of Intent. |  |
| Title |  |
| Signature |  |
| Date |  |

**Letter of Intents are due Friday, October 3rd, 2025**

**Completed Letters of Intent can be emailed to soniao@fnesc.ca**

**Final Reports for funded projects are due Friday, May 22nd, 2026**

**A Final Report Template will be provided prior to that date.**