



South West Chronic Disease Support Inc.

SOUTHWEST CHRONIC DISEASE SUPPORT

PROCEDURE

Approved by: Board of Directors

Number: 4-3

Date Approved: May, 2016/Reviewed January 2020

Application Process

1. Application forms will be made widely available and may be accessed at:
Physician/Nurse Practitioner Offices
Home Care Offices
Hospitals/Health Centres
On line at <http://www.swcds.ca>
2. Applications should be forwarded to swcdsinc@sasktel.net
If the applicant does not have email access they may be forwarded to:
South West Chronic Disease Support
Box 458
Shaunavon, SK
S0N 2M0
3. The applicant must be aware the application is being made in their name and sign the application form.
This is mandatory.
4. The Applications Committee meets monthly to review applications. In urgent circumstances the committee will meet as required to meet the needs of the applicant.
5. The maximum length of time fundraising will be back dated is six months from date of appointments/date on receipts.
6. In certain circumstances, the applications committee may approve reimbursement of a "volunteer driver". Reimbursement will be by actual receipt or .35/km. The per diem of \$45/day may also be claimed by the volunteer driver.
7. The Application Committee will inform the applicant in writing, by email, as to the status of their application (approval, amount approved, etc.). A copy of the approval letter will be sent to the Treasurer – SWCDS who will forward a cheque for the requested amount to the applicant.
8. If the approval is for funds to be distributed in advance the approval letter will state this. The Treasurer – SWCDS will arrange for approved funds to be released to the applicant, either through a cheque or gift cards. The applicant must forward the receipts for this approval prior to being considered for further grants.

See Appendix 4-3A

