

## VICTORIA WOMEN IN NEED COMMUNITY COOPERATIVE

# WIN SELF SUFFICIENCY PROGRAM

### 1. **Mandate:**

As a community cooperative concerned with women's self sufficiency, and the opportunity for women to build their personal dreams, WIN is pleased to be able to provide the WIN Self Sufficiency Program.

The mandate of the WIN Self Sufficiency Program is to provide financial support to women who are transitioning to self sufficiency. The program will provide each successful applicant with financial support when it is determined that it will be transformational to that woman's ability to pursue opportunities that will lead toward her self sufficiency, including:

1. training or education;
2. personal or career development;
3. the development of a (new or current) cooperative venture started by or specifically benefiting women. Applications can be from individual members or the Cooperative itself.
4. other opportunities leading to self-sufficiency.

### 2. **Definitions:**

**Financial Support** – A specific amount of money provided to a woman based on a successful application to the WIN Self Sufficiency Program. The maximum value of any financial support to an individual will not exceed \$1500. The specific amount is at the discretion of the WIN Self Sufficiency Program Committee.

**Income** – if your application is successful, and WIN provides an individual with financial support, then the amount received is considered 'income' by Canada Revenue Agency, so you will be issued a T4A at year end for your tax filing purposes.

### 3. **Eligibility:**

Eligibility is determined by the extent to which the application meets the mandate of the WIN Self Sufficiency Program. The WIN Self Sufficiency Program has complete discretion in selecting successful applicants and its decision is final and binding on all applicants. The WIN Self Sufficiency Program is not required to provide reasons for its decisions in selecting applicants.

**4. Deadline:**

Completed applications are accepted on an ongoing basis. If Self Sufficiency funds are required by a particular date please specify. All applicants will be contacted after a decision has been made by the committee. **Please do not contact the WIN Self Sufficiency Program by phone regarding the status of an application. Please email inquiries to [michelle@womeninneed.ca](mailto:michelle@womeninneed.ca)**

**5. Restrictions:**

We restrict applicants to a maximum of one application within a calendar year. In subsequent years, preference may be given to those individuals who have not previously received financial support through the WIN Self Sufficiency Program.

The use of the financial support is restricted to the purpose stated in your application. A successful applicant's request to transfer the funds to another purpose must be submitted to the WIN Self Sufficiency Program, in writing, for approval. If an applicant is granted financial support that cannot be used for the intended purpose, then the applicant will be required to return it.

We restrict applicants to those who have received referrals to the WIN Self Sufficiency Program from an established non-profit organization, cooperative association or educational institution.

**6. Priorities:**

All applications will be considered; however, priority will be given to applicants who can demonstrate that the financial support will have a significant impact on their ability to move forward in their lives on their path to becoming self sufficient.

**7. Guidelines:**

Please follow these guidelines to ensure that your application is processed correctly:

- Answer all questions fully and completely;
- Write legibly – typewritten submissions are preferable (but not essential);
- Make sure the application is complete and you have included all information;
- The more information you provide the easier it is for us to assess your application;
- Attach both your personal and organizational reference letters;
- Be specific regarding the dollar amount requested;
- List all items needed with verifiable costs attached.

**Each application is treated confidentially and considered with care and respect. The funds for the WIN Self Sufficiency Program come exclusively from donors and are limited, and so we are not able to assist everyone who applies.**

**APPLICATION FORM**

Type of Financial Support being applied for:

- Training (describe below)
- Career Development (describe below)
- Education (describe below)
- Cooperative Development (describe below)
- Personal Development (describe below)
- Materials required (list with detail of amounts needed for each material)
- Other (please describe briefly)

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If you have received support from WIN before, please give details below including date, amount and purpose.

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**PERSONAL INFORMATION:**

Applicant Name	
Date of Birth (MM/DD/YYYY)	
Address	
City and Province	
Postal Code	
Telephone (home)	
Telephone (work)	
Telephone (cell)	
Email	
Current Employer (if applicable)	
Current Position	
<b>Social Insurance Number*</b> We require your SIN because you are required to report bursaries as income. We will issue a T4A for your tax filing requirements.	







All applicants are required to provide letters from both a personal and an organizational reference together with this application. The written letters from your references must be included as part of this application in the same envelope or as part of the same email or fax.

**Please note: By providing a Personal and Organizational Reference, you and they are agreeing that we may contact the people whose names you have provided below. During the process of verifying the information that you have provided, the content of your application will be discussed, as deemed appropriate.**

**PERSONAL REFERENCE:**

The personal reference should be someone who has known you for some time and is able to verify the information you have provided in the personal statement above. The personal reference must write a letter including the following:

1. Give details of how long the reference has known you;
2. Verify the information in the personal statement; and
3. Include any additional information relevant to support your application.

Name of Reference	
Telephone Number of Reference	
Signature of Personal Reference	
Date of Signature	

**ORGANIZATIONAL REFERENCE:**

The purpose of the organizational reference is to verify your referral information from an organization which is another community organization (non-profit organization, cooperative association or educational institution) that you have had a relationship with in the past two years. The organizational references must write a letter including the following:

1. Give details of how long the reference has known you;
2. Verify the information in the personal statement; and
3. Include any additional information relevant to support your application
4. If you are applying for financial support for training or education, your organizational reference must refer to this in their letter.

Name of Reference	
Name of Organization	
Telephone Number of Reference	
Signature of Organizational Reference	
Date of Signature	

I certify that all of the above information is true and correct. Any omission or inaccurate information could jeopardize my application and entitle the Victoria Women In Need Community Cooperative to claim the repayment of the financial support provided.

I understand that my personal information collected in this application will be used in determining Program eligibility and for administering the WIN Self Sufficiency Program. I further understand that the WIN Self Sufficiency Program will collect, use, disclose and retain my personal information in accordance with the British Columbia *Personal Information Protection Act*.

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Signature

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Date

Check List

- Completed Application Form signed and dated
- Signature of Personal Reference
- Signature of Organizational Reference
- Organizational Reference Letter
- Personal Reference Letter

**If you are applying for training or education – please also include:**

- Copy of course registration document (if relevant)
- Proof of enrolment in university or college (if relevant)
- Detailed course information from institution running the course including
  - Course content
  - Length of course
  - Start date and
  - Course fees

**Please note that originals will need to be available for review prior to final approval of your application.**

Return this form to: Attention: WIN Self Sufficiency Program  
 Victoria Women In Need Community Cooperative  
 785 Pandora Avenue  
 Victoria, BC  
 V8W 1N9

Fax: 250-412-0654

Email: [michelle@womeninneed.ca](mailto:michelle@womeninneed.ca)

Thank you for your application. If you have any questions or require additional information, please email us.