# Annex A: HSIF Letter of Intent Assessment Criteria and Optional Template

**Please note that this template is provided for Nations or organizations that may wish to use for ease of application. The template is optional and applicants may submit in other formats, while addressing the required criteria included herein.** **Please feel free to paste the template onto organizational stationary.**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **2023-2024 HSIF Letter of Intent: Criteria and Optional Template**  **First Nations and Inuit Health Branch – Alberta Region** | | | | | |
| **Part 1 – Organizational Information** | | | | | |
| **Recipient Name**  Please identify legal name of the organization | | | | | |
| **Organization Type**  Select one of the following: First Nation Community; Tribal Council; Health Organization | | | | | |
| **Address**  Please include full mailing address | | | | | |
| **Phone Number**  **( )** | | | **Email Address** | | |
| **Project Lead** | | | | | |
| **Given Name** | | **Family Name** | | **Title** | |
| **Phone Number** | | | **Email Address** | | |
| **Part 2 – Project Description** | | | | | |
| **Project Name**  The project title conveys the project’s central focus and is detailed enough to tell the reader at a glance what the project is about | | | | | |
| **Funding Arrangement Holder**  What organization/community do you propose will receive and manage the HSIF funding to carry out this project? | | | | | |
| **Project Duration**  Please insert the planned start and end date of the project. **At this time, HSIF Letters of Intent are only being solicited to provide HSIF funding for fiscal years 2023-24 to 2025-26.** | | | | | |
| **Funding Request**  Please state the total funding requested to complete the project and include a high-level budget (see Part 3 below for a sample budget template). | | | | | |
| **Project Team**  Please describe the team that will implement the project. Identify dedicated team members including the project lead or manager, research and technical assistant(s), support staff, consultants, contractors etc., as well as the role and involvement of Nation/Organization leadership. | | | | | |
| **Partnership Mandate and Letters of Support**  Please summarize the discussion that has occurred with the groups who are proposed to be involved in the project. If multiple Nations and/or organizations are participating, please indicate the mandate received by each Nation or organization’s leadership. Ultimately, integration projects need the support of all partners – First Nations, provincial and federal – and will need to demonstrate the commitment of the partners to be funded. As such, please include letters of support from Nation or partner organization leadership with your Letter of Intent to demonstrate mandate and commitment. | | | | | |
| **Project Context**  Project context considerations:   * Briefly outline the need that the HSIF project is meant to address. * Why is now the right time for this project? * Does this HSIF project build on previous work? | | | | | |
| **Project Description** | **Objective**  Please describe the principle objective(s) of the project. If the project supports enhanced coordination for pandemic response, please identify here. | | | | |
| **Project Activities**  Please describe the proposed project activities. | | | | |
| **Sustainability**  HSIF funds time limited projects. Please describe how the project deliverables will be sustainable after the project has ended. | | | | |
| **Part 3 – Sample Budget Template** | | | | | |
| **Item** | | | | | **Budget ($)** |
| Salaries/Wages | | | | |  |
| Equipment and Supplies | | | | |  |
| Information, Documents, Web | | | | |  |
| Facility Rentals | | | | |  |
| Travel | | | | |  |
| Professional Fees (Facilitator/Trainer) | | | | |  |
| Administration Costs | | | | |  |
| Others (Specify): | | | | |  |
| **Total:** | | | | |  |