

# Peel Region Reaching Home 2024-2025 Call for Proposals Support Services & Capital Projects General Guide and Application Form Submission Deadline: October 17, 2024

## Application Guide

The Peel Region Reaching Home Community Advisory Board is issuing a call for proposals for projects that seek to prevent and reduce homelessness in Peel Region. Projects must focus on activities that help ensure people who are experiencing homelessness or at imminent risk of homelessness are able to stabilize their circumstances to move beyond emergency needs. Applicants that work from an Anti-Racism and Anti- Oppression framework and can demonstrate innovative approaches to ending homelessness, strong partnerships, and meaningful engagement of people with lived experience of homelessness will be prioritized to receive a grant.

## Deadline

The Reaching Home application and all relevant documents must be submitted no later than October 17, 2024. Applications submitted after this deadline will not be considered for a grant.

## Submission Instructions

You may submit your signed Reaching Home 2024-2025 application and all relevant documents in one of two (2) ways:

### 1. By Courier

Attn: Grace Gyles, Supervisor Housing Client Services  
Region of Peel, Human Services, Housing Services  
10 Peel Centre Dr., Suite B, PO Box 3880 STN B  
Brampton, ON L6T 0E6

### 2. Electronically at [zzgreachinghome@peelregion.ca](mailto:zzgreachinghome@peelregion.ca)

You may scan your signed Reaching Home 2024-2025 application and all relevant documents and send electronic copies via email. Make sure each attached document is clearly labeled with your organization's name. You must keep the original application with original signatures as you may be required to submit a hard copy later.

Please note, the Region of Peel's server will automatically reject any email over 10 MBs. If you must split your submission over two emails, please ensure you have "part 1 of 2" and "part 2 of 2" in your email subject line.

## Eligible Activities

For a list of all eligible and ineligible support services and capital activities, please review the [Reaching Home Directives](#), thoroughly prior to applying. Additional information can be found on the Reaching Home web page: <https://peelregion.ca/housing/reaching-home-program.asp>

## CAB Priorities

The CAB is encouraging applicants to demonstrate how they have included the following components into their proposed projects:

- Creative and innovative approaches to ending homelessness in Peel
- Strong partnerships with other service providers and/or community groups
- Meaningful engagement of people with lived experience of homelessness in the design and implementation of your proposed project.
- Applied an equity and inclusion framework.
- Priority will be given to community agencies that support under-serviced areas including: Cooksville ON, Caledon ON, Port Credit ON, and Malton ON.

Applicants who successfully demonstrate these components will be prioritized for funding.

## Budget Allocation and Administrative Costs

The funding cap has been eliminated, meaning there is no maximum amount of funding you can request for your proposed project. The elimination of the funding cap means there may be more projects competing for a larger share of Reaching Home funding. Therefore, it is possible that fewer projects will be funded than in previous years. Peel's 2024/2025 Reaching Home support services and capital projects budget is \$5,600,000.

You must determine an appropriate funding request based on the scope of your proposed project, rationale of overall costs needed to achieve outcomes, costs associated with capital expenditures, the feasibility of sustaining the project once the Reaching Home funding has ended, and other sources of funding.

Your project's administrative costs must not exceed 15% of your total costs. Administrative costs are for activities which guide and enable effective program delivery by providing support through overall organizational governance, operations, management, planning, finance, communications, human resources and IT. These costs are not project specific.

## Sustainability

The Reaching Home grant is a short-term investment. Therefore, you should base your Reaching Home funding request not only on what is needed to execute your proposed project, but also on the sustainability of your project going forward. For example, if you are requesting \$250,000 dollars from Reaching Home for the 2024- 2025 year, how will project activities or project outcomes be sustained the following year in the absence of Reaching Home funding?

Projects that fail to demonstrate their sustainability may not be approved for funding.

## FOR CAPITAL PROJECTS ONLY!

As per federal requirements, if you are proposing a capital project, you must complete and submit the Reaching Home Sustainability Checklist with your application. The Sustainability Checklist can be found here: <https://www.peelregion.ca/housing/reaching-home-program.asp>

## Grant Period

Successful Reaching Home capital project applicants may receive a grant for the 2024-2025 fiscal year. All funds must be fully spent by March 31, 2025.

## Financial Requirements

As part of your Reaching Home 2024-2025 application, your organization must submit financial statements.

For your organization's current financial year, you must submit a copy of your organization's most recent year- to-date financial statement as approved by your Board of Directors.

For your organization's last completed financial year, you must submit one of the following:

1. Organizations with a total annual operating budget of \$0 to \$150,000 within the last two years may submit a Notice to Reader statement for the last completed financial year instead of audited financial statements.
2. Organizations with a total annual operating budget of \$150,001 to \$250,000 within the last two years may submit a Review Engagement Report for the last completed financial year instead of audited financial statements.
3. Organizations with a total annual operating budget of \$250,001 or greater within the last two years must submit audited financial statements for the last completed financial year.

## How to Complete the Application Form

To apply for a Reaching Home grant, complete the fillable PDF application form found at: <https://www.peelregion.ca/housing/reaching-home-program.asp>

Open the PDF form with Adobe Acrobat Reader. **Mac Users: Do not use Mac Preview to open and complete the PDF form. The form will not function correctly. Use Adobe Acrobat Reader.**

You must fill in the form electronically. Hand-written submissions will not be accepted. This form allows you to save and print the data you enter. Submissions that do not include the application form will not be accepted.

1.0 General Information					
Legal Name of Organization:					
Address Line 1:					
Address Line 2:					
City/Town:		Province		Postal Code:	
General Email:				General Telephone #	
Website:					
1.1 Business Information					
Type of Organization:				Incorporation Date (YYYY-MM-DD):	
Incorporation Number:					
Registered Charitable Tax Number:					
Executive Director (ED) Name:					
ED Email:					
ED Tel #:				ED Alt Tel #:	
Please provide a copy of your organization's articles of incorporation (formerly called letters patent)					
1.2 Insurance					
Does your organization have general liability insurance?		Yes <input type="checkbox"/>		No <input type="checkbox"/>	
If yes, please specify the amount:					
Does your organization have directors and officer's liability insurance?		Yes <input type="checkbox"/>		No <input type="checkbox"/>	
If yes, please specify the amount:					

## 1.3 Governance

Please list the information for your organization's Board of Directors as of the date of your application:

	Name	Board Position	Residency	Occupation/Employer
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				
11				
12				
13				
14				

Are all the positions on the Board filled?  Yes  No

If no, what steps are being taken to recruit new board members? (50 words max)

How many Board meetings are held per year?

How often are the Board's bylaws, policies, and procedures reviewed?

### 1.4 Nature of Organization

What is your organization's mission or mandate? (100 words max)

Which sector best represents your organization's core work?

<input type="checkbox"/> Homelessness Services	<input type="checkbox"/> Business/Corporate	<input type="checkbox"/> Settlement/Immigration
<input type="checkbox"/> Shelter/Residential Services	<input type="checkbox"/> Primary Health Care	<input type="checkbox"/> Employment/Job Training
<input type="checkbox"/> Mental Health/Addiction Services	<input type="checkbox"/> Youth Services	<input type="checkbox"/> Religion/Faith Group
<input type="checkbox"/> Police/Corrections/Justice	<input type="checkbox"/> Food Security	<input type="checkbox"/> Victims of Family Violence
<input type="checkbox"/> Legal Services	<input type="checkbox"/> Service Club (e.g., Rotary Club)	<input type="checkbox"/> Seniors Services
<input type="checkbox"/> Education	<input type="checkbox"/> Aboriginal Services	<input type="checkbox"/> Other (specify):

How long has your organization been delivering programs /services to individuals and/or families who are homeless or at imminent risk of homelessness:			
<input type="checkbox"/> 0-3 years	<input type="checkbox"/> 4-7 years	<input type="checkbox"/> 8-11 years	<input type="checkbox"/> 12+ years
Briefly describe your organization’s experience of delivering programs/services to individuals and/or families who are homeless or at imminent risk of homelessness? (100 words max)			
Do you have examples of clients experiencing positive outcomes as a result of your services? If yes, please provide anonymized copies of testimonials or other client feedback with your application submission. (Max 2 pages)			<input type="checkbox"/> Yes <input type="checkbox"/> No
Does your organization have a political affiliation? <input type="checkbox"/> Yes <input type="checkbox"/> No			
If yes, briefly describe the relationship: (50 words max)			
Does your organization have a religious affiliation? <input type="checkbox"/> Yes <input type="checkbox"/> No			
If yes, briefly describe the relationship: (50 words max)			



1.5 Operations	
As of April 2024, how many employees does your organization employ?	
What is the total number of volunteers recruited by your organization in 2023?	
What is the total number of unique clients served by your organization in 2023?	
In which municipalities does your organization provide services and programs? (Check all that apply)	
<input type="checkbox"/> Brampton	<input type="checkbox"/> Caledon
<input type="checkbox"/> Mississauga	<input type="checkbox"/> Other Municipality (specify):
1.6 Accounting Practices	
As part of the review process, your organization's year end financial statements will be reviewed for compliance with Generally Accepted Accounting Principles (GAAP).	
<b>What is your organization's financial year-end date (MM-DD)?</b>	
Does your organization contract external auditors to conduct financial audits? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, you must submit your most recently completed audited financial statements with your application. If no, please refer to financial requirement section (Page 3) to see which financial statements you must submit.	
1.7 Revenue and Expenditures	
For the <u>last completed financial year</u> , what was your organization's total revenue?	
For the <u>last completed financial year</u> , what was your organization's total expenditure?	
Surplus/deficit for <u>last completed financial year</u> (AUTO-CALCULATE)	
If your organization had a surplus or deficit, please describe how this was addressed? (50 words max)	
For the <u>current financial year</u> , what is your organization's projected total revenue?	
For the <u>current financial year</u> , what is your organization's projected total expenditure?	
Projected surplus/deficit for <u>current financial year</u> : (AUTO-CALCULATE)	

If your organization is projecting a surplus or deficit, please describe how this will be addressed?  
(50 words max)

**1.8 Debt**

Does your organization have any debt?     Yes                       No

If yes, please provide the following details

Type	Maturity Date	Debt Amount	Description

**1.9 Unrestricted Reserves**

Unrestrictive reserves are defined as those funds that have not been restricted by a donor and therefore may be spent at the discretion of the Board of Directors or an affiliated organization such as a trust fund, property corporation, or foundation.

As of April 01, 2024, what is your organization's level of unrestrictive reserves?	
How many months of your organization's operating costs, does this reserve amount cover?	

Has your organization placed any internal restrictions on this reserve amount? <input type="checkbox"/> Yes <input type="checkbox"/> No		
If yes, please provide the following details		
Internally Restricted Amount	Description of Internal Restriction	
If applicable, please explain any plans to spend unrestricted reserve funds in the next three years: (50 words max)		
Does your organization need to increase its level of unrestricted reserves?		<input type="checkbox"/> Yes <input type="checkbox"/> No
If yes, please describe any plans in place to increase funds (50 words max)		

1.10 Other Sources of Funding			
Please list all other Region of Peel funding your organization/agency is <b>currently</b> receiving:			
Name/Type of Funding	Funding Amount	Funding Start Date	Funding End Date

Is your organization receiving funding from any other sources? <input type="checkbox"/> Yes <input type="checkbox"/> No	
If yes, what is the number of funding sources?	

## 2.0 Support Services -Your Proposed Project Details

If you are applying for a Reaching Home grant that will be put towards support services, you must complete section 2.0 of the application. If you are not applying for a support services grant, please skip this section and move on to section 3.0.

### 2.0 General Information

Name of Support Service Project:

Expected Start Date:

Expected End Date: No  
later than March 31, 2025

Primary location where the project will take place (Provide Full Address):

If applicable, second location where the project will take place (Provide Full Address):

### 2.1 Project Description

Proposed projects should demonstrate how it will improve the lives of individuals and/or families who are homeless or at imminent risk of homelessness.

Briefly describe your proposed project (200 words max)

## 2.2 Target Population Group

Only support service projects that target individuals and families who are experiencing homelessness or at imminent risk of homelessness are eligible for a Reaching Home grant.

Please identify the homeless population your support service project will target. Check all that apply.

<input type="checkbox"/>	<p><b>Unsheltered Individuals:</b> <i>This refers to people who lack housing and are not accessing emergency shelters or accommodation, except during extreme weather conditions. In most cases, people are staying in places that are not fit for human habitation. This includes people living in public spaces or private spaces without consent or contract (i.e. parks, sidewalks, vacant buildings); and in places not intended for human habitation (i.e. cars, other vehicles, garages, attics, makeshift shelters, shacks or tents)</i></p>
<input type="checkbox"/>	<p><b>Emergency Sheltered individuals:</b> This refers to people who, because they cannot secure permanent housing, are accessing shelter and system supports, generally provided at no cost or minimal cost to the user. Such accommodation represents a stop-gap institutional response to homelessness provided by government, non-profits, faith-based organizations and/or volunteers. (e.g. emergency overnight shelters for the homeless, shelters for people affected by violence, emergency shelters for people fleeing natural disaster or destruction of accommodation due to fire, floods, and communities facing imminent eviction).</p>
<input type="checkbox"/>	<p><b>Provisionally Accommodated Individuals:</b> This describes situations in which people who are technically homeless and without permanent shelter, access accommodation that offers no prospect of permanence. Those who are provisionally accommodated may be accessing temporary housing provided by government or the non-profit sector or may have independently made arrangements for short-term accommodation. This includes people living in transitional/interim housing, couch-surfers, hidden homeless, people accessing short-term, temporary rentals (i.e. motels, hostels, rooming houses, etc.), and people in institutional care who lack permanent housing arrangements.</p>
<input type="checkbox"/>	<p><b>Individuals At Imminent Risk of Homelessness:</b> This describes a situation where one's current housing will end within two months; for whom no subsequent residence has been identified; and is at immediate risk of moving into an emergency shelter or a place not fit for human habitation. Factors that may contribute to being at imminent risk of homelessness include: precarious employment; sudden unemployment with few prospects; existing housing supports being discontinued; households facing eviction; severe and persistent mental illness, active addictions, substance use and/or behavioral issues; and division of household (due to separation, divorce, conflicts between caregivers, and children), etc.</p>

**How will you identify and reach out to your target population? What is your outreach strategy?**  
(100 words max)

**How many clients do you plan to serve over the course of your proposed project?**

Do you intend to target a specific sub-population?  Yes  No

If yes, please check all that apply.

Priority will be given to projects that serve members from the Aboriginal community and populations that are underserved.

Gender	Age
<input type="checkbox"/> Male	<input type="checkbox"/> Children (0 to 11)
<input type="checkbox"/> Female	<input type="checkbox"/> Youth (12 to 17)
<input type="checkbox"/> Transgendered/Transsexual	<input type="checkbox"/> Youth Adults (18 to 24)
<input type="checkbox"/> Two-Spirit	<input type="checkbox"/> Adults (25 to 30)
<input type="checkbox"/> Non-Binary	<input type="checkbox"/> Mature Adults (31 to 64)
<input type="checkbox"/> Other Identity	<input type="checkbox"/> Seniors (65+)
Populations of Interest	Special Considerations
<input type="checkbox"/> Aboriginal People	<input type="checkbox"/> Pregnant Women
<input type="checkbox"/> Immigrants	<input type="checkbox"/> Victims of Domestic Violence
<input type="checkbox"/> Refugees	<input type="checkbox"/> People with Addictions
<input type="checkbox"/> Racialized People / Visible Minorities	<input type="checkbox"/> People living with Physical Needs or Disabilities
<input type="checkbox"/> War Veterans	<input type="checkbox"/> People living with Chronic Illnesses
<input type="checkbox"/> People who identify as LGBTQQIP2SAA	<input type="checkbox"/> People living with Developmental Disabilities
<input type="checkbox"/> Lone-Parent Families	<input type="checkbox"/> People living with Mental Health Issues
<input type="checkbox"/> Two-Parent Families	<input type="checkbox"/> People living with HIV/AIDS or other infectious disease

If your project intends to target a specific sub-population, please describe how the proposed program/activities are specifically designed to provide services to this sub-population.

## 2.3 Demonstrate Need

You must demonstrate the extent of your target population’s needs. “Need” can cover several aspects such as employment levels, mental health and substance use issues, number of meals served, etc. It can also include stories from people with lived experience of homelessness and those who interact within the homelessness sector. Provide evidence-based data, facts, figures, and anecdotal evidence to support your case.

What are the distinct needs of the population group and how will you assess these needs?  
Provide evidence-based data, research to support your response (100 words max)

Will you use an assessment tool to determine the needs of your target population?	<input type="checkbox"/> Yes <input type="checkbox"/> No
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If yes, please indicate which assessment tool you will use:

## 2.4 Eligible Project Activities

### Housing Services

Services that lead to an individual or family transitioning into more safe, appropriate, and stable housing. Forms of housing could include:

- Transitional, supportive, and social housing;
- Living arrangements with friends or family members that are expected to be long-term; and,
- Indigenous housing options that reflect Indigenous values, beliefs and practices (e.g., community or family living environment) and are delivered by Indigenous organizations

For your proposed support services project, please provide the following information:

Eligible Activity (check all that apply)	For each applicable category, describe how you will implement these activities during your project? (100 words max)
<input type="checkbox"/> <b>Housing Attainment</b> <ul style="list-style-type: none"> <li>Determining an individual's or family's needs and preferences for housing and related supports.</li> <li>Securing housing by working with private and public local real estate, landlord associations, and home</li> </ul>	

<p>communities (e.g., First Nation band, Inuit community, or Métis settlements).</p> <ul style="list-style-type: none"> <li>• Providing landlord-tenant services for an individual or family that has moved into housing. This includes, for example, mediation and problem-solving when a person is first housed (e.g., within the first three months).</li> <li>• Providing more intensive housing search support (e.g., accompaniment to viewings).</li> <li>• Re-housing (if required).</li> </ul> <p>There is a requirement to contact clients 12 months after the initial housing attainment to collect the following data:</p> <ul style="list-style-type: none"> <li>○ Number of people who did not remain housed at 12 months</li> <li>○ Reasons for not remaining housed</li> <li>○ Number of people who successfully exited at or before 12 months</li> <li>○ Number of people who were still housed at 12 months and still require supports</li> </ul>	
<p><input type="checkbox"/> Short-term Rental Assistance</p> <ul style="list-style-type: none"> <li>• Short-term financial assistance in the context of a rapid re-housing project up to maximum of 6 months.</li> <li>• Within parameters that are established Peel, funding to help cover housing costs in the short term (up to a maximum of six months) while people wait for longer-term rental assistance, including the Canada Housing Benefit or benefits from provincial, territorial or municipal programs.</li> <li>• Paying the cost of a maximum of one month of rent for a market rental unit to hold it for a new tenant exiting homelessness.</li> </ul> <p>By selecting this activity area, the following data must be collected and reported at the end of the fiscal reporting period: Total number of people who benefited from an Emergency Housing service.</p>	



<p><input type="checkbox"/> <b>Housing Set-up</b> Activities that cover costs associated with setting up a housing unit, including: insurance, damage deposit, first and last months' rent, maintenance (e.g., painting), moving, furniture, basic groceries and supplies at move-in, etc. Available to all individuals and families, not just those in receipt of Short-term Rental Assistance.</p>	
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## Prevention and Shelter Diversion

Eligible Activity (check all that apply)	For each applicable category, describe how you will implement these activities during your project? (100 words max)
<p><input type="checkbox"/> <b>Prevention</b> Prevention is an intervention that provides support to people before a crisis occurs, aiming to reduce risks and prevent homelessness. Homelessness prevention includes supporting people who are currently housed, but at imminent risk of losing their housing.</p> <p>Examples of homelessness prevention interventions include:</p> <ul style="list-style-type: none"> <li>• Problem solving with landlords to stop an eviction.</li> <li>• Working with family and other natural supports to prevent loss of housing for youth.</li> <li>• Making referrals to prevent relationship breakdown (e.g., family counselling or mediation).</li> <li>• Providing short-term or emergency financial assistance (e.g., to cover the costs of rent or utility arrears, cleaning/repairs to a rental unit so that it is safe, or groceries to help with that month's budget).</li> <li>• Finding another housing option before a tenancy ends, or before a youth ages out of care or leaves a family home.</li> </ul>	

<p><input type="checkbox"/> <b>Shelter Diversion</b></p> <p>Interventions that help people who are seeking access to emergency shelter to explore other safe and appropriate alternatives.</p> <p>Examples of shelter diversion strategies include:</p> <ul style="list-style-type: none"> <li>• Problem solving to find places where people can stay (even for a few days), such as with a neighbour, a friend or family.</li> <li>• Providing flex funds (small grants) to cover transportation costs or groceries, to make the transition to the alternative housing option easier.</li> </ul> <p>Supporting people to move directly into housing when they leave public institutions (e.g., hospital, corrections, or child welfare), so they are not discharged into homelessness.</p>	
<p><i>There is a 3-month follow up requirement for these services: rental assistance, landlord/family mediation, utility payments, trusteeship, and other financial related services. The following data must be collected and reported at the end of the fiscal reporting period:</i></p> <ul style="list-style-type: none"> <li>○ <i>Number of people who benefited from a Core Service during the year</i></li> <li>○ <i>Number of people (of those reached) that remained housed at 3 months</i></li> <li>○ <i>Number of people (of those reached) that did not remain housed at 3 months</i></li> <li>○ <i>Reasons for not remaining housed</i></li> </ul> <p><i>A qualitative summary of the other types of Prevention and Shelter Diversion services that were delivered during the fiscal reporting period must be provided.</i></p>	

<p><b>Client Support Services</b></p> <p>Client support services help improve the integration and connectedness to support services, such as the provision of basic needs and treatment services. This may also include services related to the economic, social, and cultural integration of individuals and families, which support them to access and retain housing.</p>	
<p>Eligible Activity (check all that apply)</p>	<p>For each applicable category, describe how you will implement these activities during your project? (100 words max)</p>
<p><input type="checkbox"/> <b>Basic Needs Services</b></p> <p>Activities may include access to shower and laundry facilities; food banks, soup kitchens, collective/community kitchens; personal</p>	

<p>hygiene items, clothing, footwear, blankets; storage for belongings; basic first aid; access to technology (e.g., phones, computers, etc.) in community settings such as a resource or drop-in centre; bus or public transit tickets related to job search/interviews, appointments and/or reconnecting with family/community.</p>	
<p><input type="checkbox"/> <b>Clinical and Treatment Services</b> Clinical and treatment services are activities that seek to improve the physical, emotional, and psychological health and well-being of individuals and families who are experiencing or at imminent risk of homelessness, to support them to access and retain housing.</p>	
<p><input type="checkbox"/> <b>Social and Community Integration Services</b> Activities that help homeless individuals or those at imminent risk of homelessness integrate into their community by providing opportunities for social and cultural engagement such as volunteer, recreational, and artistic opportunities</p> <p><i>By selecting this activity area, the following data must be collected and reported at the end of the fiscal reporting period: <b>Number of people who participated in Social and Community Integration activities.</b></i></p>	
<p><b>Economic Integration Services</b> Economic integration services are activities that seek to bridge individuals experiencing or at imminent risk of homelessness to existing employment programs, remove barriers to employment or support skill enrichment to facilitate labour market readiness, to support them to access and retain housing.</p> <p><i>By selecting these activity areas, the following data must be collected and reported at the end of the fiscal reporting period:</i></p> <ul style="list-style-type: none"> <li>○ <i>Number of people who began receiving income assistance</i></li> <li>○ <i>Number of people who began new paid employment</i></li> <li>○ <i>Number of people who began an education program</i></li> <li>○ <i>Number of people who began a job-training program</i></li> </ul> <p><i>Demographic data for the individuals reported under each Economic Integration service.</i></p>	

<input type="checkbox"/> <b>Income Assistance</b> Services to connect individuals and families to existing income benefits and financial assistance (e.g., provincial/territorial social assistance, child benefits, disability benefits, Veterans allowance, old age security, or employment insurance).	
<input type="checkbox"/> <b>Employment Assistance</b> Pre- and post-employment services (e.g., job search assistance, interview preparation) that bridge individuals to the labour market and assist them to maintain employment and build self-sufficiency.	
<input type="checkbox"/> <b>Education Assistance</b> Connecting individuals and families to education and training programs, and services to support the successful participation in these programs (e.g., bus passes, clothing or equipment, food and non-alcoholic beverages, childcare costs, and internet access for the duration of the program).	
<input type="checkbox"/> <b>Job-Training Assistance</b> Job training services such as essential skills development (e.g., reading, document use, numeracy, writing, oral communication, working with others, critical thinking, computer use and continuous learning); and/or life skills (e.g., job interview training, anger management, sessions on healthy relationships, parenting skills development, effective communication, budgeting, cooking, or healthy eating).	

## 2.5 Indicators & Mandatory Targets

Reaching Home is increasing the program’s focus on achieving results. All projects are expected to contribute to reducing or preventing homelessness. For each eligible activity, Reaching Home has identified several indicators that will be used to measure the success of your project at reducing and preventing homelessness. Some indicators have mandatory targets that you must set.

**Please set mandatory targets for the eligible activities your support services project will undertake. Some activities have no mandatory targets. Also, if the indicator does not apply to your proposed project, please leave blank.**

Eligible Activity	Indicator	Mandatory Target
Housing attainment	# of people housed	
Short-term Rental Assistance	# of people who benefitted from short-term rental assistance	
Housing Set-Up	# of people who benefit from housing set-up costs	
Prevention and Shelter Diversion	# of people who received a rapid housing placement through a housing first program	
	# of people contacted for a 12-month follow up	
	# of people who remained housed at 12 months	
Basic Needs Services	# of people served	
Clinical and Treatment Services	# of people served	
Social and Community Integration Services	# of people served	
Income Assistance	# of people served	
Employment Assistance	# of people served	
Education Assistance	# of people served	
Job-Training Assistance	# of people served	

## 2.6 Impact

Reaching Home is focused on ending homelessness at the local level as opposed to simply managing it. To accomplish this, applicants must demonstrate their willingness and ability to collect and share data and show the impact their proposed projects have on homelessness in Peel. The Region of Peel will support all Reaching Home projects with this activity.

How will your proposed project help end homelessness for individuals and/or families in Peel?  
(100 words max)

Is your organization willing and able to, with support from the Region of Peel, collect, share, and disseminate data related to your proposed Reaching Home project?  Yes  No

## 2.7 Improved Housing Outcomes

**This is a CAB Priority!** Projects are encouraged to demonstrate how their proposed project will improve housing outcomes for people experiencing homelessness and/or those at risk of homelessness, from Peel's Coordinated Access System.

How will you use to address the needs of your target population? Describe any new ideas, methodologies, and/or tools your proposed project will use. (100 words max)

How is your proposed project different from existing homelessness services? What gap(s) will your innovative approach address in Peel’s homelessness service system? (100 words max)

## 2.8 Project Partners

**This is a CAB Priority!** Project partners can be a key component in the success of your initiative and help improve service integration. The role of partners can vary from a co-coordination, mentorship, or collaborative role, to providing financial/in-kind supports and training.

For the proposed project, will your organization be formally working with any community partners?

Yes     No

If yes, please list all the partner organizations/groups involved with the project with the details of their contribution. Start by describing your own organization’s role in the partnership

**Please provide a letter of commitment from each community partner with your application submission**

Name of Partner Organization	Main Role of Partner Organization (50 words max)
Applicant:	
Partner:	
Partner:	
Partner:	

**This section will not be graded if no letters of commitment from partnering agencies are submitted**

## 2.9 People with Lived Experience of Homelessness

**This is a CAB Priority!** "Lived experience" refers to the level of expertise of an individual in the area of homelessness due to their own personal understanding having lived the condition and/or circumstance. It is also associated with recovery, which implies the person with lived experience is developing greater self-sufficiency in the pursuit of personal goals and functional capacity.

Your proposed project should demonstrate how it will engage people with lived experience of homelessness. Examples of "lived experience" engagement include but are not limited to leadership, consultation, empowerment, peer mentorship, and social inclusion.

**Please describe how people with lived experience were engaged in the planning and development of your proposed project? Please do not include any personal and/or personal health information that would identify individuals. (100 words max):**

**Please describe how people with lived experience will be engaged throughout the implementation of your proposed project? Please do not include any personal and/or personal health information that would identify individuals. (100 words max):**



## 2.10 Sustainability

The Reaching Home grant is a one-time, short-term investment. Reaching Home considers a project sustainable when either the project activities or benefits achieved as a result of the project activities continue after the Reaching Home grant has ended.

How will your organization continue to deliver the activities and/or sustain the benefits of your proposed project once the Reaching Home grant ends? (100 words max) What is the mitigation strategy should this funding end or not be approved?

## 3.0 Capital Project- Your Proposed Project Details

If you are applying for a Reaching Home grant that will be put towards a Capital Project, you must complete section 3.0 of the application. If you are not applying for a capital project grant, please skip this section and move on to section 4.0.

### 3.0 General Information

Name of Capital Project:

Expected Start Date:

Expected End Date:

No later than March 31, 2023

### 3.1 Facility Profile

Location where the capital project will take place (Provide Full Address):

Does your organization own or lease/rent the property that the proposed capital project will affect?

Own

Lease

Rent

If your organization owns the property, is there a lien or mortgage on the property? (Check all that apply)

Mortgage

Lien

There is no lien or mortgage on the property

If your organization rents or leases the property, what is the monthly rental or lease payment?  
When does your rental agreement or lease terminate?

### 3.2 Demonstrate Need

You must demonstrate the need for your proposed capital project. "Need" can cover a number of aspects such as age of facility, number of clients served by facility and/or equipment, etc. It can also include stories from people with lived experience of homelessness and those who interact within the homelessness sector. **Use facts, figures, and anecdotal evidence to support your case.**

What is the need which your proposed capital project seeks to address? (100 words max)

### 3.3 Eligible Project Activities

Reaching Home defines capital projects as capital investments that are intended to increase the capacity or improve the quality of facilities that address the needs of individuals and families who are experiencing homeless or at imminent risk of homelessness, including those that support culturally appropriate programming for Aboriginal individuals and families. Reaching Home will only fund capital projects that either (1) increase net new or enhance permanent housing and permanent supportive housing units for Peel's Coordinated Access System; or (2) preserve or improve non-residential facilities. If the activity is not listed, it is not eligible for funding.

For your proposed capital project, please provide the following information:

Facility Type (Choose One)	Eligible Activities (Check all that apply)	Provide a description of your proposed capital project: (100 words max)
<input type="checkbox"/> <b>Affordable Permanent Housing &amp; Permanent Supportive Housing</b> Housing that includes supports and services, with no maximum length of stay. Clients in these facilities have tenancy rights. Services depend on the client's needs and are provided to help residents maintain independence	<input type="checkbox"/> New construction <input type="checkbox"/> Purchase of land or a building <input type="checkbox"/> Renovation of facility for upgrades and to meet building standards. <input type="checkbox"/> Repurposing an existing property to create permanent supportive housing. <input type="checkbox"/> Purchase of equipment, furniture, and/or vehicle	

<p>and stability to promote social integration. The support services are linked to the housing itself. May be either scattered-site housing or congregated in one location.</p>		
<p><input type="checkbox"/> <b>Non-Residential Facility</b> Facilities that provide services to meet basic needs and/or provide services to promote longer-term stability of individuals and families who are homeless or at-risk of homelessness. Examples include food banks, soup kitchens, drop-in centres, multi-service centres, counseling centres, etc.</p>	<p><input type="checkbox"/> New construction <input type="checkbox"/> Purchase of land or a building <input type="checkbox"/> Renovation of facility for upgrades and to meet building standards. <input type="checkbox"/> Repurposing an existing property to create permanent supportive housing. <input type="checkbox"/> Purchase of equipment, furniture, and/or vehicle</p>	
<p>Will your proposed capital project create new permanent supportive housing units/beds? <span style="float: right;"><input type="checkbox"/> Yes <input type="checkbox"/> No</span></p>		
<p>If yes, how many of those new units/beds will be created through the re-purposing of a facility?</p>		
<p> </p>		
<p>Will your proposed capital project create any fully accessible, barrier free units? <span style="float: right;"><input type="checkbox"/> Yes <input type="checkbox"/> No</span></p>		

### 3.4 Community Integration

**This is a CAB Priority!** Projects are encouraged to demonstrate that there is a broad array of services (social services and other support services) located nearby to the proposed project, to support social and community integration.

What services are located nearby to the proposed project? (100 words max)

How is your proposed project different from other homelessness capital projects? What gap(s) will your innovative approach address in Peel's homelessness service system? (100 words max)

### 3.5 Project Partners

**This is a CAB Priority!** Project partners can be a key component in the success of your initiative and help improve service integration. The role of partners can vary from a co-coordination, mentorship, or collaborative role, to providing financial/in-kind supports and training.

Will your organization be formally working with any partners to complete the proposed capital project?

Yes    No

Once the proposed capital project is complete, will your organization be formally working with any partners to deliver services or programming?

Yes    No

If you answered yes to either or both questions above, please provide the following details of the partnership. Start by describing your own organization's role in the partnership.

Name of Partner Organization	Main Role of Partner Organization (50 words max)
Applicant:	
Partner:	
Partner:	
Partner:	

Partner:

**\*\*Please provide a letter of commitment from each community partner with your application submission \*\***

### 3.6 People with Lived Experience of Homelessness

**This is a CAB Priority!** "Lived experience" refers to the level of expertise of an individual in the area of homelessness due to their own personal understanding having lived the condition and/or circumstance. It is also associated with recovery, which implies the person with lived experience is developing greater self-sufficiency in the pursuit of personal goals and functional capacity. Your proposed capital project should demonstrate how it will engage people with lived experience of homelessness. Examples of "lived experience" engagement include but are not limited to leadership, consultation, empowerment, peer mentorship, and social inclusion.

Please describe how people with lived experience were engaged in the planning and development of your proposed project? Please do not include any personal and/or personal health information that would identify individuals. (100 words max):

Please describe how people with lived experience will be engaged throughout the implementation of your proposed project? Please do not include any personal and/or personal health information that would identify individuals (100 words max):

### 3.7 Neighborhood Engagement Strategy

Please describe the neighbourhood engagement strategy planned for this proposed project.

### 3.8 Sustainability

Please describe how your proposed capital project will provide a long-term (a minimum of five years) benefit to individuals and families who are homeless or at imminent risk of homelessness?  
(100 words max)

Will your proposed capital project increase your organization’s operational budget (i.e. additional staff needed once the project is complete, or an increase of clients consuming services)?  Yes  No

If yes, please provide the following information:

Operational Impact (e.g. 1 new full-time staff person)	Projected Annual Operational Cost (e.g. \$78,000)	Operational Funding Source (e.g. Community Investment Program, Ontario Trillium Foundation)	Is this funding confirmed for the next five years?	
			2025: <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
			2026: <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
			2027: <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
			2028: <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
			2029: <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
			2025: <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
			2026: <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
			2027: <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
			2028: <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
			2029: <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
			2025: <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
			2026: <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
			2027: <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
			2028: <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
			2029: <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>

Please provide a letter of commitment from any secured funding source with your application submission.

## 4.0 Your Proposed Budget

There is no maximum amount of funding you can request for your proposed project. Your project's administrative costs must not exceed 15% of your total costs.

4.1 Staffing Costs	Funding Requested from Reaching Home	Funds received from Other Sources	Total Cost Requested from Reaching Home	Description of Expenditure (Mandatory)
Staff Wages A Position Title:				<p><b>Choose one:</b></p> <ul style="list-style-type: none"> <li><input type="checkbox"/> This is a new position created for Reaching Home activities</li> <li><input type="checkbox"/> This is a existing position previously funded (partially or fully) by Reaching Home</li> <li><input type="checkbox"/> This is an existing position and we are redirecting the work to Reaching Home activities</li> <li><input type="checkbox"/> We are increasing the Hours of an existing position and dedicating those hours to Reaching Home activities</li> </ul> <p><i>You must submit a job description for each position that details duties, hours, remuneration, and qualifications</i></p>
Staff Wages B Position Title:				<p><b>Choose one:</b></p> <ul style="list-style-type: none"> <li><input type="checkbox"/> This is a new position created for Reaching Home activities</li> <li><input type="checkbox"/> This is a existing position previously funded (partially or fully) by Reaching Home</li> <li><input type="checkbox"/> This is an existing position and we are redirecting the work to Reaching Home activities</li> <li><input type="checkbox"/> We are increasing the Hours of an existing position and dedicating those hours to Reaching Home activities</li> </ul> <p><i>You must submit a job description for each position that details duties, hours, remuneration, and qualifications</i></p>
Staff Wages C Position Title:				<p><b>Choose one:</b></p> <ul style="list-style-type: none"> <li><input type="checkbox"/> This is a new position created for Reaching Home activities</li> <li><input type="checkbox"/> This is a existing position previously funded (partially or fully) by Reaching Home</li> <li><input type="checkbox"/> This is an existing position and we are redirecting the work to Reaching Home</li> </ul>



				<p>activities</p> <p><input type="checkbox"/> We are increasing the Hours of an existing position and dedicating those hours to Reaching Home activities</p> <p><i>You must submit a job description for each position that details duties, hours, remuneration, and qualifications</i></p>
<p><b>Mandatory Employment Related Costs (MERCs) for all positions listed above:</b> payments an employer is required to make by law such as EI, CPP, WSIB, vacation, and EHT.</p>				
<p><b>Benefits for all positions listed above:</b> payments an employer is required to make in respect to employees by virtue of company policy or collective agreement i.e. contributions to group pension plan or group insurance plan</p>				
<p><b>Staffing Subtotals</b></p>				(AUTO-CALCULATE)

4.2 Professional Fees	Funding Requested from Reaching Home	Funds received from Other Sources	Total Cost Requested from Reaching Home	Description of Expenditure (Mandatory)
<b>Professional Fees:</b> for non-administrative services necessary to deliver project outcomes. Contracts of \$25,000 or more require a competitive process				
<b>Legal Fees:</b> For fees associated with the review and preparation of legal documents necessary to delivery project outcomes				
<b>Professional Fees Subtotal</b>				(AUTO-CALCULATE)

4.3 Direct Project Costs	Funding Requested from Reaching Home	Funds received from Other Sources	Total Cost Requested from Reaching Home	Description of Expenditure (Mandatory)
<b>Rent or lease of project location:</b> can include applicant owned premise				
<b>Utilities for project location</b>				
<b>Furniture:</b> (e.g. desks, chairs, tables) necessary for delivering project outcomes				
<b>Equipment:</b> lease, rental, or purchase of equipment (e.g. laptop, cell phone), necessary for delivery of project outcomes				
<b>Technology:</b> computer software and licenses directly related to delivering project outcomes				
<b>Internet &amp; Telephone:</b> used by direct project staff as needed to deliver project outcomes				

<b>Office Supplies:</b> Materials and office supplies as needed to deliver project outcomes				
<b>Printing &amp; Advertising:</b> Printing, signage, ads, brochures, flyers, and web design, as needed to deliver project outcomes				
<b>Travel:</b> travel costs for staff, consultants, and volunteers as related to delivery of project outcomes, and as per travel claims				
<b>Professional Development:</b> for project staff where training and/or conference attendance directly affects delivery of project outcomes				
<b>Honorarium:</b> for contributions by people with lived experience of homelessness, elders, and other volunteers. Must be related to project outcomes				
<b>Other Direct Project Costs:</b> list specific costs in the description box				
<b>Direct Project Costs Subtotal</b>				(AUTO-CALCULATE)

4.4 Client Participation Costs	Funding Requested from Reaching Home	Funds received from Other Sources	Total Cost Requested from Reaching Home	Description of Expenditure (Mandatory)
<b>Emergency Assistance for Housing Loss Prevention Clients:</b> (e.g. one-time assistance for rent, utilities, etc.)				
<b>Living assistance for individuals and families</b> (e.g. groceries, food vouchers, personal care items and other household items that will remain with the client)				

<b>Training &amp; Assessments:</b> Participant fees for general skill building, pre-employment supports, and self-sufficiency. Must be related to project outcomes				
<b>Materials and Supplies:</b> Materials and supplies that are used by clients and are necessary to achieve project outcomes				
<b>Client Travel</b> (e.g. bus tickets): for clients as it relates to project outcomes				
<b>Other Client Participation Costs:</b> list specific costs in the description box				
<b>Client Participation Subtotal</b>				<b>(AUTO-CALCULATE)</b>

4.5 Facility Costs	Funding Requested from Reaching Home	Funds received from Other Sources	Total Cost Requested from Reaching Home	Description of Expenditure (Mandatory)
<b>Land / Building Purchase:</b> land purchase (market value); building or facility purchase; appraisal fees; legal fees; offsite service costs; soil remediation costs; survey fees; title fees; inspections				
<b>Pre-Development Costs for Demolition:</b> project manager; construction manager; labour; materials; equipment; services; office services costs; survey fees; soil remediation costs				
<b>Pre-Development Costs for Servicing:</b> architecture services; engineering services; environmental fees and assessments; building permits; development cost				

charges; development permits; municipal connection fees; inspections; licenses; legal fees				
<b>Construction or Renovation to Facilities:</b> cost of labour and materials, general contractors, professional fees for project management, site supervision, and inspections				
<b>Facility Subtotal</b>				<b>(AUTO-CALCULATE)</b>

4.6 Capital Assets	Funding Requested from Reaching Home	Funds received from Other Sources	Total Cost Requested from Reaching Home	Description of Expenditure (Mandatory)
<b>Purchase of Equipment/Vehicle/Furniture:</b> laundry equipment, kitchen equipment, common area furnishings, office equipment, tools, machines, vehicles, computers. Purchased vehicles must be used exclusively for Reaching Home service delivery. You must provide a quote from a reputable vendor for each item.				
				Did you submit a quote for this item? Yes <input type="checkbox"/> No <input type="checkbox"/>
				Did you submit a quote for this item? Yes <input type="checkbox"/> No <input type="checkbox"/>
				Did you submit a quote for this item? Yes <input type="checkbox"/> No <input type="checkbox"/>
				Did you submit a quote for this item? Yes <input type="checkbox"/> No <input type="checkbox"/>
				Did you submit a quote for this item? Yes <input type="checkbox"/> No <input type="checkbox"/>
				Did you submit a quote for this item? Yes <input type="checkbox"/> No <input type="checkbox"/>
				Did you submit a quote for this item? Yes <input type="checkbox"/> No <input type="checkbox"/>
				Did you submit a quote for this item? Yes <input type="checkbox"/> No <input type="checkbox"/>
				Did you submit a quote for this item? Yes <input type="checkbox"/> No <input type="checkbox"/>
				Did you submit a quote for this item? Yes <input type="checkbox"/> No <input type="checkbox"/>
<b>Capital Assets Subtotal</b>				<b>(AUTO-CALCULATE)</b>

4.7 Administration Costs	Funding Requested from Reaching Home	Funds received from Other Sources	Total Cost Requested from Reaching Home	Description of Expenditure (Mandatory)
Administration Costs for activities which guide and enable effective program delivery by providing support through overall organizational governance, operations, management, planning, finance, communications, human resources and IT. These costs are not project specific.				
Administration Subtotal				(AUTO-CALCULATE)
Grand Totals (Add 4.1+4.2+4.3+4.4+4.5+4.6+4.7)				

### 5.0 Your Proposed Budget

Please detail the cash and in-kind contributions that your organization will receive from other sources for your proposed project. Start with your own organization.

Contributor	Cash Amount	In-Kind Amount	Purpose of Contribution	Confirmed Funding?
Applicant:				<input type="checkbox"/> Yes <input type="checkbox"/> No
Contributor:				<input type="checkbox"/> Yes <input type="checkbox"/> No
Contributor:				<input type="checkbox"/> Yes <input type="checkbox"/> No
Contributor:				<input type="checkbox"/> Yes <input type="checkbox"/> No
Contributor:				<input type="checkbox"/> Yes <input type="checkbox"/> No
Contributor:				<input type="checkbox"/> Yes <input type="checkbox"/> No
Total Contributor:			(AUTO-CALCULATE)	
Please provide a letter of commitment from each confirmed funding contributor with your application submission.				

## 5.0 Submission Checklist, Grant Awareness, Declaration & Signatures

5.0 Submission Checklist		
In order for your application to be considered for a Reaching Home grant, you must submit all required documents. Please complete the following checklist to ensure that all required documents are submitted with your application.		
Document	Submitted	
	Yes	No
I declare that I have reviewed the Reaching Home Directives and understand what is eligible and ineligible for funding prior to applying.	<input type="checkbox"/>	<input type="checkbox"/>
One (1) Reaching Home Application form completed and signed by the legal signing officers of your organization. If submitting a scanned copy of the application electronically, you must keep the original application with original signatures as you may be required to submit the original document at a later time.	<input type="checkbox"/>	<input type="checkbox"/>
One (1) copy of the organization's articles of incorporation (formerly letters patent), indicating proof of incorporation and the correct legal name of the organization	<input type="checkbox"/>	<input type="checkbox"/>
One (1) copy of your organization's most recently completed financial statements. See Page 3 for the types of financial statements that will satisfy the Region of Peel's requirements	<input type="checkbox"/>	<input type="checkbox"/>
If applicable, one (1) copy of your organization's audited management letter and agency response.	<input type="checkbox"/>	<input type="checkbox"/>
One (1) copy of your organization's most recent year-to-date financial statement approved by your organization's Board of Directors	<input type="checkbox"/>	<input type="checkbox"/>
If applicable, one (1) copy of client testimonials or other client feedback (Please do not include any personal and/or personal health information that would identify individuals) - Max 2 pages	<input type="checkbox"/>	<input type="checkbox"/>
If your organization has secured funding for your proposed project from other sources, please include a letter of commitment from each contributor.	<input type="checkbox"/>	<input type="checkbox"/>
If your organization has confirmed partnerships to help complete your proposed project or will be formally working with any partners to deliver services or programs once your proposed project is complete, please include a letter of commitment from each partner.	<input type="checkbox"/>	<input type="checkbox"/>
If you are applying for a grant to put towards a capital project, have you included the Reaching Home Sustainability Checklist. Download the form at: <a href="mailto:zzgreachinghome@peelregion.ca">zzgreachinghome@peelregion.ca</a>	<input type="checkbox"/>	<input type="checkbox"/>
If you are applying for a grant to hire and/or subsidize project staff, have you included a job description for each position that details duties, hours, remuneration, and qualifications.	<input type="checkbox"/>	<input type="checkbox"/>
If you are applying for a grant to put towards a capital project that will include the purchase of capital assets (i.e. equipment, vehicles, and/or furniture), have you provided a quote from a reputable vendor for each item listed in your proposed budget.	<input type="checkbox"/>	<input type="checkbox"/>
<b>An application is considered complete only when all the above items are submitted</b>		

## 6.2 Reaching Home Grants Awareness

Where did you hear about the Reaching Home Support Services and Capital Projects grants?  
(Check all that apply)

- Region of Peel Website
- Other Website (specify):
- Community Event (specify):
- Peel Reaching Home Email Blast
- Word of Mouth
- Other (specify):

## 6.3 Declaration & Signatures

The Declaration must be signed by as many persons as required by the organization's statutes or by-laws

- I declare that I am legally authorized to sign and submit the Application on behalf of the Organization, named in Section 1.0.
- I declare that the information provided in this Application and supporting documentation is true, accurate, and complete to best of my knowledge.
- I understand that if the information described in the Application is false and misleading, I or the Organization may be required to repay some of, or the entire grant received.
- I understand that the information described in the Application may be shared with the Peel Region Reaching Home Community Advisory Board Members and well as other funding contributors as listed in this application.

Signatory's Name	Title	Signature	Date
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Signatory's Name	Title	Signature	Date
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Signatory's Name	Title	Signature	Date
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**Notice of collection**

This information is collected pursuant to the Municipal Act, 2001, S.O. 2001, c. 25, s. 11(1) and the Housing Services Act, 2001, S.O. 2011, c. 6, Schedule 1, ss 13, 44 and 60 for the purposes of determining eligibility for Reaching Home funding. Any questions regarding this collection may be directed to Housing Services, Client Services Program Supervisor, 10 Peel Centre Drive, Suite B, 5th Floor, Brampton ON, L6T 4B9, 905-791-7800 ext. 8212.