



Health Canada application form for the Youth Mental Health Fund

Note: Please refer to [Annex A of the Applicant guide](#) for instructions on how to complete each section of this form.

All fields indicated by an asterisk (*) are mandatory.

Application information		
Funding opportunity name Youth Mental Health Fund		Program name Health Care Policy and Strategies Program
Application contacts		
Note: Only 1 contact is mandatory.		
Full name*	Email*	Role*
Applicant information		
Organization legal name:*		English operating name, if different than legal name:
Organization email address:*		French operating name, if different than legal name:
Organization preferred language:* English French		Organization phone number:*
Website:*		
Select your type of organization:*		Specify if "other" was selected:
Address line 1:*		Address line 2:
City:*		Province or Territory:*
Postal code:*		Country:*

Organization mandate. Provide an overview of your organization, including your organization's mandate, vision, philosophy, principles and goals:*

Executive officer details

First name:*

Last name:*

Email:*

Phone:*

Job title:*

Contact preferred language:*

English French

Eligibility

Note: You may attach proof of Eligibility documentation (we recommend you attach your document in .doc, .pdf format, there is a maximum of 20MB per attachment).

File name. List the Eligibility documentation you have attached to this application:*

File description. Describe the Eligibility documentation you have attached to this application:*

Project information

Project title (English):*

Project title (French):*

Project summary. Provide a brief summary of your project (maximum character limit is 1,000):*

Planned project start date (yyyy-mm-dd):*

Planned project end date (yyyy-mm-dd):*

Applicant capacity

Suitability. Describe how you, the applicant, are well-suited to undertake the project (for example, credibility, relevant skills, interest, and experience with the project audience or project beneficiaries; maximum 2,000 characters):*

Governance and delivery capacity. Describe your ability, as an applicant, to appropriately manage and oversee the project (for example, governance structure, defined roles and responsibilities, formal personnel policies and procedures, capacity to recruit, train and retain appropriate personnel; maximum 2,000 characters):*

Financial management capacity. Describe your capacity, as an applicant, to manage the finances for the project (for example, sufficient financial staff, financial administration or management policies, procedures and systems); (maximum 2,000 characters):*

Rationale

Note: You may attach the evidence-base, citations, research or references for your project (we recommend you attach your document in .doc, .pdf format, there is a maximum of 20MB per attachment).

Funding priorities. Describe how your project aligns with one or more of the funding priorities, as outlined in the Applicant guide (maximum 2,000 characters):*

Project description. Describe your project, include what your project is trying to achieve, your project goals (maximum 5,000 characters):*

Project need. Describe the evidence-base for the project. Demonstrate or expand on the need for the project and why it is important to carry out this work (maximum 5,000 characters):*

Reach and beneficiaries

Select the scope that applies to your project:*

Specify if "other" was selected:

List the communities, cities, provinces or territories in which your project will take place:*

Project audience. Describe who the project intends to reach (project audience). Who will participate in or be exposed to project activities? Include key demographics as described in the Applicant guide (maximum 3,000 characters):*

Project beneficiaries. Describe whose health the project will ultimately benefit (project beneficiaries). How will your project affect the health of your project beneficiaries? Provide the rationale for why you chose these beneficiaries over others. Include key demographics as described in the Applicant guide (maximum 3,000 characters):*

Sex- and Gender-Based Analysis Plus (SGBA Plus). Describe how you will incorporate SGBA Plus into the planning, implementation, and evaluation of your project. Include how project activities will be tailored to address the needs of the project audiences or beneficiaries (for example, culture, geographic area, indigeneity, sex, gender, language, socio-economic status) as outlined in the Applicant guide (maximum 3,000 characters):*

Official language minority communities. Could your project impact official language minority communities (OLMCs), as outlined in the Applicant guide? If yes, describe why your project will impact these communities and how you will meet their specific needs. If no, explain why your project will not impact these communities (maximum 3,000 characters):*

List any organizations representing OLMCs in health that you have consulted while planning your project:*

Select the languages you will use for your project activities and outputs, in whole or in part:*

English

French

Other

Specify if "other" was selected:

Partnerships

Note: Attach letters of support (we recommend you attach your document in .doc, .pdf format, there is a maximum of 20MB per attachment). If you require more space, please reuse this page.

Are you working with partners?*

Yes No

Partner name (List one partner per row)	Partnership contribution Describe how your partner will contribute to your project (for example, help you to reach project audiences or beneficiaries); (maximum 500 characters)	Partnership confirmed?	Letter of support

Program outcomes

Describe which program outcomes your project will contribute to, as specified in the Applicant guide (maximum 500 characters):*

Objectives, activities and evaluation

Note: Reuse this section if you exceed 4 objectives.

Objective 1

Objective. List a project objective as specified in the Applicant guide (maximum 1,000 characters):*

Activity. Describe a key project activity that you plan to complete to meet this project objective (maximum 2,000 characters):*

Number of persons reached. Identify the number of people in your project audience who you plan to reach through this activity:*

Outputs. What do you plan to produce from this activity? (maximum 1,000 characters):*

Indicators. Identify what information you will use to track **project outcomes (results)**, such as age, sex, and other relevant factors (maximum 1,000 characters):*

Data collection methods and analysis. How will you gather and analyze your indicator information and who will be responsible? (maximum 1,000 characters):*

Timelines and frequency. How often you will collect this data and for what time period? (maximum 1,000 characters):*

Objective 2

Objective. List a project objective as specified in the Applicant guide (maximum 1,000 characters):

Activity. Describe a key project activity that you plan to complete to meet this project objective (maximum 2,000 characters):

Number of persons reached. Identify the number of people in your project audience who you plan to reach through this activity:

Outputs. What do you plan to produce from this activity? (maximum 1,000 characters):

Indicators. Identify what information you will use to track **project outcomes (results)**, such as age, sex, and other relevant factors (maximum 1,000 characters):

Data collection methods and analysis. How will you gather and analyze your indicator information and who will be responsible? (maximum 1,000 characters):

Timelines and frequency. How often you will collect this data and for what time period? (maximum 1,000 characters):

Objective 3

Objective. List a project objective as specified in the Applicant guide (maximum 1,000 characters):

Activity. Describe a key project activity that you plan to complete to meet this project objective (maximum 2,000 characters):

Number of persons reached. Identify the number of people in your project audience who you plan to reach through this activity:

Outputs. What do you plan to produce from this activity? (maximum 1,000 characters):

Indicators. Identify what information you will use to track **project outcomes (results)**, such as age, sex, and other relevant factors (maximum 1,000 characters):

Data collection methods and analysis. How will you gather and analyze your indicator information and who will be responsible? (maximum 1,000 characters):

Timelines and frequency. How often you will collect this data and for what time period? (maximum 1,000 characters):

Objective 4

Objective. List a project objective as specified in the Applicant guide (maximum 1,000 characters):

Activity. Describe a key project activity that you plan to complete to meet this project objective (maximum 2,000 characters):

Number of persons reached. Identify the number of people in your project audience who you plan to reach through this activity:

Outputs. What do you plan to produce from this activity? (maximum 1,000 characters):

Indicators. Identify what information you will use to track **project outcomes (results)**, such as age, sex, and other relevant factors (maximum 1,000 characters):

Data collection methods and analysis. How will you gather and analyze your indicator information and who will be responsible? (maximum 1,000 characters):

Timelines and frequency. How often you will collect this data and for what time period? (maximum 1,000 characters):

Additional project information

Scalability. Describe how your project could be applied to different settings or to other audiences; or expanded to other parts of Canada regionally or nationally in the future (for example, how project partners can help expand the reach and/or impact of the project; maximum 2,000 characters):*

Risk. What risks have you identified for your project and how will you address them so that your project can be successful? (maximum 2,000 characters):*

Sustainability. Project funding is time-limited. If you plan to continue any aspects of your project after Health Canada or Public Health Agency of Canada funding has ended, what are they and how will they be supported? Describe how existing or new partners will contribute to the sustainability of your project. If your project will not continue once funding has ended, what steps will be taken to ensure your project wrap-up is smooth? (maximum 2,000 characters):*

Do you have a plan for how the project could continue after this time-limited funding has ended?*

Yes No

Amounts owing to the Government of Canada. Do you, the applicant, owe any monies to the Government of Canada? If yes, please indicate the amount owing, and the name of the department or agency to which the amount is owed:*

Previous funding from Government of Canada. Have you received funding from the Government of Canada (grants or contributions) within the past 12 months? If yes, please indicate the amount received, and the name of the department or agency, and the funding program name. Note: This information may be used for a reference check (maximum 1,000 characters):*

Budget

Note: The budget periods are for each fiscal year, from April 1 to March 31.

Category: Personnel salaries and benefits

Fiscal year 2025 to 2026*	Fiscal year 2026 to 2027*	Fiscal year 2027 to 2028*	Fiscal year 2028 to 2029*	

Details. Provide budget details as specified in the Applicant guide (maximum 1,000 characters):*

Category: Contractual personnel

Fiscal year 2025 to 2026*	Fiscal year 2026 to 2027*	Fiscal year 2027 to 2028*	Fiscal year 2028 to 2029*	

Details. Provide budget details as specified in the Applicant guide (maximum 1,000 characters):*

Category: Travel and accommodations

Fiscal year 2025 to 2026*	Fiscal year 2026 to 2027*	Fiscal year 2027 to 2028*	Fiscal year 2028 to 2029*	

Details. Provide budget details as specified in the Applicant guide (maximum 1,000 characters):*

Category: Materials and supplies

Fiscal year 2025 to 2026*	Fiscal year 2026 to 2027*	Fiscal year 2027 to 2028*	Fiscal year 2028 to 2029*	

Details. Provide budget details as specified in the Applicant guide (maximum 1,000 characters):*

Category: Equipment

Fiscal year 2025 to 2026*	Fiscal year 2026 to 2027*	Fiscal year 2027 to 2028*	Fiscal year 2028 to 2029*	

Details. Provide budget details as specified in the Applicant guide (maximum 1,000 characters):*

Category: Rent and utilities

Fiscal year 2025 to 2026*	Fiscal year 2026 to 2027*	Fiscal year 2027 to 2028*	Fiscal year 2028 to 2029*	

Details. Provide budget details as specified in the Applicant guide (maximum 1,000 characters):*

Category: Performance measurement				
Fiscal year 2025 to 2026*	Fiscal year 2026 to 2027*	Fiscal year 2027 to 2028*	Fiscal year 2028 to 2029*	
<p>Details. Provide budget details as specified in the Applicant guide (maximum 1,000 characters):*</p>				
Category: Capital expenditures				
Fiscal year 2025 to 2026*	Fiscal year 2026 to 2027*	Fiscal year 2027 to 2028*	Fiscal year 2028 to 2029*	
<p>Details. Provide budget details as specified in the Applicant guide (Maximum 1,000 characters):*</p>				
Category: Other costs				
Fiscal year 2025 to 2026*	Fiscal year 2026 to 2027*	Fiscal year 2027 to 2028*	Fiscal year 2028 to 2029*	
<p>Details. Provide budget details as specified in the Applicant guide (maximum 1,000 characters):*</p>				

Budget summary				
Total for fiscal year 2025 to 2026	Total for fiscal year 2026 to 2027	Total for fiscal year 2027 to 2028	Total for fiscal year 2028 to 2029	
Total amount requested from Health Canada:				

Cash and in-kind contributions

Source (List one legal name per row)	Amount (in dollars)	Cash or in-kind	Cash/In-kind description Describe the cash or in-kind funding. What will it be used for in your project? Provide other details as outlined in the Applicant guide.	Funding confirmed or pending



Note: Attach any documentation demonstrating confirmed or pending cash or in-kind funding (we recommend you attach your document in .doc, .pdf format, there is a maximum of 20MB per attachment). If you require more space, please reuse this page.

Additional documents

Note: Attach additional documentation to support your application as specified in the Applicant guide (we recommend you attach your document in .doc, .pdf format, there is a maximum of 20MB per attachment).

File name. List the documentation you have attached to this application.

File description. Describe the documentation you have attached to this application.

Declaration

The undersigned on behalf of the organization declares that:

- The submission of this application does not constitute a commitment on the part of Health Canada to award funding. Even if the project is eligible, funding is not guaranteed. It is possible that the approved funding may be less than the amount requested in the application.
- Health Canada will not reimburse an applicant for costs incurred in the preparation and/or submission of an application.
- If this application for funding is approved, a written agreement will be entered into between the applicant and Government of Canada outlining the terms and conditions for the funding and delivery of the proposed project.
- If this application for funding is approved, project activities will be undertaken in compliance with all applicable statutes, regulations, orders, standards and guidelines. Individuals associated with the project will act at all times in a manner that will not bring the Government of Canada's reputation into disrepute.
- Applicants for funding must ensure that their employees/Directors are in compliance with the [Conflict of Interest Act](#), [the Values and Ethics Code for the Public Sector](#). Where an applicant employs or has a major stakeholder who is either a current or former (in the last twelve months) public office holder or public servant in the federal government, compliance with the Codes must be demonstrated.
- Applicants for funding must ensure that if they employ members to lobby on their behalf, those individuals must comply with the [Lobbying Act](#).
- The information in this application will be subject to the *Access to Information Act*.
- The information in this application and all accompanying documents is true, accurate and complete.
- This application is made on behalf of the applicant organization with its full knowledge and consent. I have the capacity and the authority to submit this application for funding on behalf of the applicant organization.

Health Canada will use the information provided in your application to review and assess your application. Health Canada may also consult and share the information in your application with other federal government departments, agencies or external experts (for example, scientific, medical, technical) with confidentiality obligations, to assist with the review and assessment of your application.

Validate and sign

When you sign, you will validate and ensure that the application has been successfully completed. Once submitted, your application will be reviewed by our staff.

Name:*

Title:*

Signature:*

Date (yyyy-mm-dd):*