



Social Enterprise *Financing* APPLICATION FORM

CAIF/CAIC @ CSI Regent Park, 585 Dundas St E, 3rd Floor, Toronto, ON M5A 2B7 • 416-467-7797 • caif@caic.ca • www.caifoundation.ca

CAIF is mandated to make loans available to charitable organizations groups, organizations or cooperatives whose mandate is to assist in the economic development of disadvantaged people or communities. CAIF will only consider applications where other sources of affordable financing are not available.

PROJECT PITCH: Explain your project and how we can help. (250 words)

A: ORGANIZATION INFORMATION

(Legal) Name of Organization:

Address:

Telephone:

Fax:

Email:

Website:

CCRA Registration/BN:

Year incorporated or organized:

Type of organization: *(i.e. non-profit, profit, cooperative, or CED organization)*Geographic area of incorporation: *(i.e. municipal, give the city; if provincial, give province)*****Please attach a description of your organization's objectives & activities.********Please attach notarial copy of Articles of Incorporation.*****PRIMARY CONTACT****SECONDARY CONTACT** Miss Ms. Mrs. Mr. _____ Miss Ms. Mrs. Mr. _____

Name:

Name:

Position:

Position:

Telephone:

Telephone:

Email:

Email:

B: ACTIVITIES & ASPIRATIONS

CAIF bases its investment decisions on the financial soundness of the application and the social benefits that will result. In this section, we are trying to learn how your organization contributes to the development of disadvantaged persons or communities, and/or about other benefits to the community arising out of your operations. This section builds upon the information supplied in the "pitch" section of the application. It is an opportunity for you to provide greater detail on your project and how CAIF can help.

Project Title:

Project Details:

In answering the questions in this section, please ensure that you explain how your organization is going to realize this project and manage its operations on an ongoing basis (i.e. what resources are required and how is the organization going to attain them). ***** Please attach your business plan along with any recent newsletters, or other reporting that will explain your project. *****

a) What is the project?

b) What is the social benefit of the project?

c) Please provide a detailed description of: i) how the project is going to be financed; and ii) how it is going to operate on an ongoing basis.

Is your organization closely affiliated with another organization? Yes No

Name of Affiliated Organization	Executive Director's Name	Telephone/Email

C. STAFF & MANAGEMENT

Please tell us about key employees (directly involved) and *attach curriculum vitae highlighting relevant experience with regards to the project.*

a) Number of full-time employees: _____

b) Number of part-time employees: _____

Name	Title or Role	#years/months with organization

BOARD OF DIRECTORS

Please tell us about your board of directors. (Attach detailed bios if available.)

Name	Office/Board Committees	#years/months on Board

D: INVESTMENT PROPOSAL

Amount of loan requested:

Please propose terms of repayment:

- Term _____
- Amortization _____
- Interest rate _____

Collateral available or names of potential guarantors:

Please demonstrate that the enterprise has a **sound and realistic business case** and is able to:

- Complete successfully in the market place;
- Become profitable within 3 years;
- Meet all repayment obligations to CAIF and any other lenders.

Shared Risk – CAIF is looking to our borrowers to make a meaningful financial contribution to the enterprise's success. Clearly explain the nature and amount of investment that your members/principals will be making in the business.

Multiple Sources of Capital – We want to ensure there is sufficient capital to launch or grow the business and that the business has been able to attract other social investors. The applicant must demonstrate that financing is available from at least one other source in addition to CAIF. This financing can either be in the form of debt or equity.

E: CREDIT INFORMATION

Identify your present sources of credit:

We may require credit information at a later stage in the approval process (i.e. bank accounts etc.)

List other sources of credit/investment that you have approached for this loan proposal and briefly describe their response. CAIF's mandate is to provide capital for those groups unable to access it through conventional sources.

F: FINANCIAL ORGANIZATIONAL CAPACITY

In order for CAIF to assess your request for financing we need to understand your organization's financial and operating capacities.

■ **Financial Data** – the applicant must provide the following (**via attachment**):

- Your most recent internal operating statement & balance sheet (within two months)
- Budget & cash flow projections for the current and upcoming year demonstrating how the CAIF loan would be repaid.
- Financial statements (audited or reviewed) for the last two years.

Demonstrate and provide information about your organization's financial management practices. (**Attach relevant documents**).

- **Financial Planning** - the applicant must show that the project and organization have long-term financial and managerial stability.
- **Organizational Resources** - does the organization have the internal resources (both financial and personnel) to see the project through.
- **Financial Operating Systems** - that ensure effective control over the organization's financial activities such as:
 - A budget and budgeting system
 - A set of accounts which are kept on a timely basis
 - A reporting system which includes a regular review of results and comparisons to budget
 - An annual review of results preferably by an independent auditor
- **Financial Soundness** - the organization must have a strong operating track record and secure economic prospects. Examples of this would be:
 - Low levels of existing debt
 - Multiple long-term sources of operating funding
 - High level of financial support from the community
 - Surpluses and reserves sufficient to deal with unforeseen difficulties

Please indicate the name, phone number and email address of the lawyer who will be representing you if your application is successful.

Name: _____

Telephone: _____

Email: _____

G: REFERENCES

List the names, addresses, phone numbers and email addresses of three references that know of your organization's work. You may also provide relevant testimonials. (Indicate whether business or personal and how they know about your organization.)

1. _____

2. _____

3. _____

How did you hear about CAIF?

Anything else you think we should know?

PLEASE SIGN HERE

By signing this application you confirm that the information provided is complete and accurate to the best of your knowledge. You also authorize the Canadian Alternative Investment Foundation (CAIF) to use your organization's name and the name of the project you are involved with in order to promote CAIF to other potential borrowers.

Chair of your board of directors (or other authorized signatory):

Name (please print)

Signature

Date (dd/mm/yyyy)

Executive director:

Name (please print)

Signature

Date (dd/mm/yyyy)

Attention: Failure to include requested information may result in the rejection of your application. Please note that CAIF cannot return application materials.