



Members Project Application Form

Title of Project: _____

Contact Person: _____ Title: _____

Email: _____ Phone: _____ Date: _____

Please provide a summary of how your project meets the following requirements:

1. Definition

A Member's Project is one that is totally initiated by and financially supported by a member in good standing of the CNIS.

Provide details of your proposed project, demonstrate your active membership with CNIS and your financial capacity to support your project.

2. Rationale

The member's project must align with the CNIS mission statement.

Refer to www.cnis.ca. How will your project align with CNIS mission?

3. Policy

The member will pay for all expenses incurred in the project through their own fundraising activities. CNIS will provide custody of the funds raised by the member and disburse the funds as per CNIS policy on membership project funds.

What is your annual budget? How will you raise funds for the project?

Procedure:

1. The member submits the proposed project, with a budget, for review by the CNIS Program Committee to determine if the project is well designed, meets the standard of the CNIS and is aligned with the mission of CNIS.
2. The Program Committee will write a letter notifying the member regarding the outcome of the review.
3. If approved, the member must raise the money to cover all the expenses of the project. This money must be raised independent of and not conflicting with CNIS fundraising activities.
4. The funds for the project are raised and submitted to CNIS. The funds are maintained by CNIS specifically for the designated project.
5. Donations received by CNIS for the project will be provided a charitable tax receipt.
6. CNIS will pay the budgeted expenses for the project based upon the submission of appropriate receipts.
7. CNIS will charge the project a 10% administrative fee.
8. A final report is to be submitted to the Board. **(Please use Member Project Form B to submit your report)**

Send a completed form to:

Email: office@cnis.ca

Fax: 604-739-4788

Mail:

Canadian Network for International Surgery
#105-1985 West Broadway Street,
Vancouver, BC
V6J 4Y3

For more information:

Phone : 604-739-4708

Visit our website: www.cnis.ca