

2024 Affiliated Neighbourhood Association Close-Out Report

Please use this document as a report for your completed Affiliated Neighbourhood Association project(s), supported through the Nurtured Neighbourhood Grant. Please complete all sections of the document and submit it to the Community Safety & Well-Being Office (CSWO) at CSWO@brampton.ca by January 15, 2025.

If you need support in completing this document, please contact the CSWO by email at CSWO@brampton.ca, or by phone at 905-874-2645, or connect directly with your [Quadrant Coordinator](#).

1. Neighbourhood Association Key Details

Please complete the following key details about your Neighbourhood Association.

a) Neighbourhood Association name:	
b) Main Point of Contact name and email:	
c) Treasurer name and email:	
d) Date funding was received:	
e) Report submission date:	
f) <input type="checkbox"/> New Neighbourhood Association	g) <input type="checkbox"/> Existing Neighbourhood Association

2. Project Responsibilities

Please outline the responsibilities of key members below.

a) Main Point of Contact Name	b) Responsibility
c) Treasurer Name	d) Responsibility
e) Name of Member (optional)	f) Responsibility (Optional)

3. New Membership and Outstanding Information

Please provide new member information and any outstanding information from existing members below. For each contact, address and phone number *or* address and email is mandatory.

Contact Name	Address	Phone Number	Email

4. Nurtured Neighbourhood Grant Funding Allocation

Please provide information about the total amount of funding received, total spent, and if there are any unspent funds. Complete the tables below to report back on how the Nurtured Neighbourhood Grant was used to complete your neighbourhood project(s). **You are required to attach electronic or paper copies of all applicable receipts and/or invoices with this Report.**

a) Total amount of grant received:	
b) Total amount of grant spent:	
c) Total amount of grant remaining:	

d) All receipts and/or invoices have been submitted with this report by email to CSWO@brampton.ca.	<input type="checkbox"/> Yes	<input type="checkbox"/> No
e) Our Affiliated Neighbourhood Association has unspent funds to return to the city.	<input type="checkbox"/> Yes	<input type="checkbox"/> No

Please note, any unspent funds must be returned to the city. To return funds, please write a cheque payable to the City of Brampton and provide the hardcopy to the CSWO by delivering it directly to your [Quadrant Coordinator](#) or sending it by mail to the following address:

City of Brampton
Community Safety & Well-Being Office
2 Wellington Street West
Brampton, Ontario, L6Y 4R2

f) Project 1			
Theme:			
Project:			
Location:			
Date Start:		Date End:	
Expense Items	Actual Cost (\$)		
Total Cost		\$	

g) Project 2 (Optional)			
Theme:			
Project:			
Location:			
Date Start:		Date End:	
Expense Items	Actual Cost (\$)		
Total Cost		\$	

6. Key Metrics

Please provide the following information regarding your project(s).

a) Project 1	
Number of people invited.	
Number of people not part of Neighbourhood Association who attended/participated.	
Total number of people who attended/participated.	
Total number of new members who joined the association.	

b) Project 2 (Optional)	
Number of people invited.	
Number of people not part of Neighbourhood Association who attended/participated.	
Total number of people who attended/participated.	
Total number of new members who joined the association.	

7. Learnings and Opportunities

Please describe what worked well, opportunities to improve for next time, and key recommendations for moving forward. Please refer to all projects.

8. Project Success

On a scale of 1 to 5 (with 1 as not successful and 5 as very successful), select how successful you feel your project(s) was.

a) Project 1:

1	2	3	4	5

b) Project 2 (Optional):

1	2	3	4	5

9. Sense of Belonging

Do you feel an increased sense of belonging with your local neighbourhood because of your participation in the Neighbourhood Association process?

Yes	No	Unsure

10. Additional Comments

Please include any additional comments you have about your overall experience completing your neighbourhood project(s).

11. Project Support

On a scale of 1 to 5 (with 1 as not helpful and 5 as very helpful), select how helpful the CSWO has been in answering your questions and helping your group to meet your goals.

1	2	3	4	5

12. Additional Feedback to CSWO

Please provide feedback to let the CSWO know how to support this experience better, and how we can better support you.

13. Consent to Share

To help promote the Neighbourhood Association initiative it is helpful to share testimonials about your experience. This may be shared in print or digital publications. If information about your experience is shared, it would include the name and location of the Neighbourhood Association.

a) I consent to the City of Brampton sharing information provided above in this report for promotional purposes.	<input type="checkbox"/> Yes	<input type="checkbox"/> No
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14. Photos and Videos

Photos or videos of people taken at public events in public spaces do not require explicit consent. If you have photos from your public events that you would like to share with the CSWO for promotional purposes, please attach them to this report or email them to: CSWO@brampton.ca with the name of your Neighbourhood Association in the subject line.

15. Renewal

Please indicate if you would like to renew your affiliation for the following year. Details on the renewal process will be available at www.brampton.ca/communitysafety early in 2025.

a) I would like to renew affiliation for my Neighbourhood Association for the following year.	<input type="checkbox"/> Yes	<input type="checkbox"/> No
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16. Completion

Upon completion of this document, please sign and submit to the CSWO at CSWO@brampton.ca. If you would like to submit using a different method, please contact the email address above.

a) Report completed by:	
b) Name:	
c) Signature:	
d) Date:	

Congratulations! You have completed your 2024 Affiliated Neighbourhood Association Close-Out Report. If you have any questions, please email CSWO@brampton.ca or call 905-874-2645.

The personal information on this form is collected under authority of the Municipal Act SO 2001, c. 25. Questions about the collection of personal information should be directed to our Call Centre by dialing 3-1-1 (within Brampton city limits) or 905.874.2000 (outside city limits). Please review the City of Brampton Privacy Statement for more information.