

Organization Name:	Neighbourhood Resident Initiative, with Support from GALA Parks and Gardens
Program Name:	Pollinator Plant Giveaway
Туре:	□ Program □ Event X Project
Identify any funding that was not included in your original application for this program/event.	X No ☐ Yes – Identify the source and amount:
(Please list all sources)	
How has your Program/Event changed?	
□ No Change	If selected, no need to complete the remainder of the form
□ Cancelled	If your program/event/project has been cancelled, identify all non-refundable expenses incurred for this program/event. The total amount shall not exceed the original Clean & Green Neighbourhood Grant request.
	Provide expense receipts.
	Total Amount?
□ Unknown	Based on current environment, applicant is unable to identify the status of program/event
X Modified	Identify how your event/program has been modified:
	Original Date: May-June 2020 New Date: May-June 2021
	The outreach to interested landowners in the Gibson Lansdowne Neighbourhoods reach has been postponed until winter, 2021 (unless funding is confirmed in 2020).

	Delivery (Identify what aspects of program/event delivery has changed):
	Same as 2020, just moved ahead to the future.
	Budget (Identify what aspects of your original program budget has changed):
	* Staff may require your organizations to submit a revised budget.
	No changes to budget.
Any other information impacting your program/event?	

Generally, it would be easier to proceed with reaching out to neighbourhood residents if there was an indication of funding being approved for this initiative. I don't want to put out a request for participation without there being any idea whether I will be able to follow through with the project. I can be flexible with its delivery, especially under COVID-19 conditions, but it hinges on the approval of the application.



Organization Name:	Green Team Gardeners
Program Name:	Murals, Workshops of Art in the Garden
Туре:	□ Program □ Event □ Project
Identify any funding that was not included in your original application for this program/event.	□ No □ Yes – Identify the source and amount:
(Please list all sources)	
How has your Program/Event changed?	
☐ No Change	If selected, no need to complete the remainder of the form
□ Cancelled	If your program/event/project has been cancelled, identify all non-refundable expenses incurred for this program/event. The total amount shall not exceed the original Clean & Green Neighbourhood Grant request. Provide expense receipts.
	Total Amount?
× Unknown	Based on current environment, applicant is unable to identify the status of program/event
× Modified	Identify how your event/program has been modified:
	Original Date: New Date:
	July 2020 A new date is unknown
	Delivery (Identify what aspects of program/event delivery has changed):

	* Staff may require your organizations to submit a revised budget.
Any other information	impacting your program/event?
-	will no longer happen in 2020.
As a result of Covid an date for this project.	d Provincial Guidelines there is no current plan to book a future
The small piece of pati HCF and Women4Char	o gardens was picked up by HARPS under funding provided by the nge.

Budget (Identify what aspects of your original program budget has

changed):



Organization Name:	Barton Village Business Improvement Area
Program Name:	Depave Paradise pilot via Clean and Green Grant
Туре:	□ Program □ Event □ x Project
Identify any funding that was not included in your original application for this program/event. (Please list all sources)	 □ No □ Yes - Identify the source and amount: \$8,000 - Hamilton Community Foundation to cover cost of design, soil testing, tree, plants, and delivery and installation of tree
How has your Program/Event changed?	More dependent upon contractors due to COVID and the reduced number of volunteers that can safely assist
□ No Change	If selected, no need to complete the remainder of the form
□ Cancelled	If your program/event/project has been cancelled, identify all non-refundable expenses incurred for this program/event. The total amount shall not exceed the original Clean & Green Neighbourhood Grant request. Provide expense receipts. Total Amount?
□ Unknown	Based on current environment, applicant is unable to identify the status of program/event
□x Modified	Identify how your event/program has been modified: Original Date: May - Sept New Date: Oct 2020 Delivery (Identify what aspects of program/event delivery has changed):

	Less community / volunteer gathering, we will be sending out postcards to neighbours and doing more social media outreach as we are unable to gather as a community
	Budget (Identify what aspects of your original program budget has changed): * Staff may require your organizations to submit a revised budget.
	Budget has increased as unable to do as much with volunteers due to COVID
Any other information	impacting your program/event?

Any other information impacting your program/event?	



Organization Name:	St. Paul's Presbyterian Church
Program Name:	St. Paul's Gardens
Type:	□ Program □ Event ⊠ Project
Identify any funding that was not included in your original application for this program/event. (Please list all sources)	☑ No☐ Yes – Identify the source and amount:
How has your Program/Event changed?	Due to COVID-19 restrictions, we have put our garden improvements on hold until 2021 at the earliest.
☐ No Change	If selected, no need to complete the remainder of the form
⊠ Cancelled	If your program/event/project has been cancelled, identify all non-refundable expenses incurred for this program/event. The total amount shall not exceed the original Clean & Green Neighbourhood Grant request. Provide expense receipts. Total Amount? \$0.00
□ Unknown	Based on current environment, applicant is unable to identify the status of program/event
□ Modified	Identify how your event/program has been modified: Original Date: New Date: Delivery (Identify what aspects of program/event delivery has changed):

Budget (Identify what aspects of your original program budget has changed):

* Staff may require your organizations to submit a revised budget.

Any other information impacting your program/event?

The church was closed due to COVID-19 restrictions from Sunday, March 15, 2020 through to Sunday, September 13, 2020. We missed the spring garden season and remain unable to gather for gardening. We are hoping to be able to purchase a rain barrel next spring and look at other garden improvements at that time.



Organization Name:	Hamilton-Wentworth Green Ventures
Program Name:	Restoration planting on the EcoHouse property
Туре:	□ Program □ Event ⊠ Project
Identify any funding that was not included in your original application for this program/event. (Please list all sources)	No Yes – Identify the source and amount: Yes, staff in-kind support provided by the Environment Management and Assessment Program of Niagara College – with an intern placement to develop restoration planting plans and community education.
How has your Program/Event changed?	Timelines have changed due to the COVID-19 pandemic. An intern has developed a plan for the project. Volunteers will be trained during an online training session (2-week nights).
☑ No Change	If selected, no need to complete the remainder of the form
□ Cancelled	If your program/event/project has been cancelled, identify all non-refundable expenses incurred for this program/event. The total amount shall not exceed the original Clean & Green Neighbourhood Grant request. Provide expense receipts. Total Amount? \$0.00
□ Unknown	Based on current environment, applicant is unable to identify the status of program/event
□ Modified	Identify how your event/program has been modified: Original Date: 2020-05-31 New Date: 2020-11-31

Delivery (Identify what aspects of program/event delivery has changed):

Changed due to COVID-19. Training and planting will happen over the course of two weekdays and one weekend event. Planting will take place in small groups of four.

Budget (Identify what aspects of your original program budget has <u>changed</u>):

* Staff may require your organizations to submit a revised budget.

No changes to the budget

Any other information impacting your program/event?

COVID-19 protocols have been developed and approved and will be implemented for volunteer restoration planting.



Organization Name:	Halam Park Housing Cooperative Inc.
Program Name:	Installation and Placement of Dog Waste System
Туре:	□ Program □ Event ⊠ Project
Identify any funding that was not included in your original application for this program/event.	No
(Please list all sources)	
How has your Program/Event changed?	
⊠ No Change	If selected, no need to complete the remainder of the form
□ Cancelled	If your program/event/project has been cancelled, identify all non-refundable expenses incurred for this program/event. The total amount shall not exceed the original Clean & Green Neighbourhood Grant request. Provide expense receipts. Total Amount? \$0.00
□ Unknown	Based on current environment, applicant is unable to identify the status of program/event
☐ Modified	Identify how your event/program has been modified:
	Original Date: New Date:

Delivery (Identify what aspects of program/event delivery has changed):
Budget (Identify what aspects of your original program budget has changed): * Staff may require your organizations to submit a revised budget.