

## EXPRESSION OF INTEREST TOOLS

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### About the Expression of Interest (EOI)

The purpose of the EOI is to equip Ontario Trillium Foundation (OTF) staff with the information needed to assess your project and your group. In many ways, the EOI acts as the first part of a Youth Opportunities Fund (YOF) application.

Most of the questions are answered by checking answers from a drop-down list. There are five narrative questions where your group can share details about your group and idea. A Project Plan and Budget are also part of the EOI.

OTF staff will review your eligibility, your readiness to do this work, the potential impact of your project, and how well you understand the needs, interests, and experiences of the young people you want to work with.

Some EOIs will be shortlisted and invited to complete the Youth Innovations Grant Application.

### Updating your responses at Grant Application (If shortlisted)

Please note that, if your EOI is shortlisted, you will only be able to change or update your responses for questions marked with >>>

### Get Ready to Apply

Learn more about the [Youth Innovations Test stream](#) and how to access the application supports available to your group and how to apply. YOF offers webinars about the Youth Innovations Stream, application writing workshops and coaching. Reach out to us if you are interested in connecting with the YOF Team about your idea: [yof@otf.ca](mailto:yof@otf.ca).

## EXPRESSION OF INTEREST QUESTIONS AND TIPS

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### TAB 1 - TYPE OF GRANT

**TAKE NOTE!** If your EOI is shortlisted, you will not be able change or update your responses in this section of the Grant Application.

1. The Youth Innovations Stream has two different types of grants. Each grant type has a different purpose and eligibility criteria. Which grant type are you interested in?  
(Check one only.)
- Youth Innovations Test grant
  - Youth Innovations Scale grant

A **Grassroots Test grant** is an opportunity for groups to test a new idea or to strategize around an issue in their community or to research an issue that matters to the group.  
A **Grassroots Scale grant** is for more established groups that have already fully tested an idea that has worked and are now ready to scale that idea. If you are not sure which grant type is right for your group, email us at [yof@otf.ca](mailto:yof@otf.ca)

2. **[IF TEST SELECTED]**

Funding for Youth Innovations Test grants is for specific purposes. Will your project:  
(Check one only.)

- Pilot a new idea
- Research an issue or new concept
- Strategize around an issue affecting YOF youth

Click "**PROCEED**" if you are certain you have chosen the right type of Youth Innovations grant. If you are unsure about which type of grant to choose, reach out to us at [yof@otf.ca](mailto:yof@otf.ca) or reference these EOI tools. Please know that this decision cannot be reversed without the support of the YOF team.

## Group Acknowledgements

- We acknowledge that the majority of our group members share identities and experiences with the youth we want to engage through this project.
- We acknowledge that our group has at least three core members.
- We acknowledge that all project activities will take place in Ontario.
- If our project is approved for funding, our group agrees to participate in YOF-led capacity building activities
- If our project is approved for funding, our group agrees to participate in a YOF evaluation process led by an external partner
- If our project is approved for funding, our group agrees to work with an organizational mentor.
- The information contained in this application and the accompanying documents is true, accurate and complete

## TAB 2 - GROUP PROFILE

**TAKE NOTE!** If your EOI is shortlisted, you will not be able change or update your responses in this section of the Grant Application.

### Group Name and Contact Information

3. Enter your group's name: \_\_\_\_\_
4. For this project, please confirm the primary contact for the grassroots group:  
Project contact name: \_\_\_\_\_  
Project contact phone number: \_\_\_\_\_  
Project contact email: \_\_\_\_\_

This person should be a member of the core group and included in the core group table.

For this project, please confirm a second contact for the grassroots group:  
Project contact name: \_\_\_\_\_  
Project contact phone number: \_\_\_\_\_  
Project contact email: \_\_\_\_\_

5. Is the primary contact for the group and writer of this Expression of Interest between the ages of 12-29 years?
- YES
  - NO

**[IF NO SELECTED]:** As an adult (30+ years), please describe your role in the application process and proposed project.

**[IF NO SELECTED]:** Please describe the role of young people in the application process and proposed project. If an adult is playing a more active role currently, describe how leadership for the project will transition over time.

## Online Profile

6. Share information on those that apply to your group:

Group Website: \_\_\_\_\_

Group Twitter: \_\_\_\_\_

Group Facebook: \_\_\_\_\_

Group Instagram: \_\_\_\_\_

Group Address: \_\_\_\_\_

Group Phone: \_\_\_\_\_

Group Email: \_\_\_\_\_

## Group Structure

7. Select the organization type that best describes your organization/group.

(Check one only.)

- Grassroots group that is **not registered** as a charity or incorporated not-for-profit
- A charitable organization or public foundation **registered as a charity** by the Canada Revenue Agency
- An organization **incorporated as a not-for-profit corporation** (this includes Métis Charter, Inuit or other Indigenous communities that are registered as not-for-profit corporations without share capital in Canada)
- A First Nations community

### Take note:

- Incorporated not-for-profits may be eligible to apply to the Youth Innovations Stream. We will need more information to make that assessment.
- Registered charities are not eligible in the Youth Innovations Stream.
- Band councils, or offices of the band council, are not eligible for the Youth Innovations Stream.

If you are unsure about how to answer this question, please email the YOF Team at [yof@otf.ca](mailto:yof@otf.ca)

**[IF FIRST NATION SELECTED]:** Band councils, or offices of the band council, are not eligible for the Youth Innovations Stream. This Stream is for grassroots youth-led groups and youth-adult partnerships only.

**[IF REGISTERED CHARITY SELECTED]:** As a registered charity, please know your organization is not eligible for the Youth Innovations Stream.

**[IF UNINCORPORATED GRASSROOTS GROUP SELECTED]:**

When did your group form? Year \_\_\_\_

Groups applying for a Test grant can be a newly formed group working together. Groups applying for a Scale grant are more established and have at least two years of experience working together to deliver their project.

**[IF INCORPORATED SELECTED]**

Incorporation number: \_\_\_\_

Year of Incorporation: \_\_\_\_

**[IF INCORPORATED SELECTED]**

As an incorporated not-for-profit, have you **independently managed funds** with no administrative support from an organizational mentor, platform, trustee and/or charitable organization? (Check one only.)

YES

NO

Check YES, if you have received funds directly from the funder to your organization's business account, managed these funds throughout the life of a project, and reported back to funders on the use of these funds. If you received funding for a project but these funds were administered by another organization, check NO.

**[IF INCORPORATED AND MANAGED OWN FUNDS]:**

How much funding did you manage independently in the last fiscal year? \$ \_\_\_\_

How much funding did you manage independently in the fiscal year before last? \$ \_\_\_\_

To be eligible for the Youth Innovations Stream your incorporated not-for-profit cannot have managed more than \$50,000 independently in each of the last two years.

**EXAMPLE 1:** Last year, you managed \$25,000 independently and the year before that you managed \$5000 independently. You may continue with your EOI.

**EXAMPLE 2:** Last year, you managed \$50,000 independently and the year before that you also managed \$50,000 independently. You may continue with your EOI.

**EXAMPLE 3:** Last year, you managed \$70,000 independently and the year before that you managed \$25,000 independently. You are not eligible to apply to the Youth Innovations Stream.

We can help if you are not sure how to answer these questions. Email us at [yof@otf.ca](mailto:yof@otf.ca).

8. Select the statement that best describes your group:

(Check one only.)

Our group is youth-led (29 years and under)

Our group is a youth-adult partnership

Our group is led by adults (30+ years)

A *youth-led group* is one where young people between 12 and 29 years lead decision-making and project delivery. A *youth-adult partnership* is one where youth and adults share power and responsibility for decision-making and project delivery. An *adult-led group* is one where adults (30+ years) lead decision-making, planning, and project delivery.

**[IF ADULT-LED SELECTED]:** The YOF Youth Innovations Stream is for youth-led groups and youth-adult partnerships only.

## Past Experiences

Tell us about your group's history and connections to community [Maximum 300 words].

Describe how and why your group was formed. Share 1 or 2 examples of previous activities your group has delivered for youth in your community. How is your work supported by community?

## TAB 3 - PROJECT LEADERS

- »» 9. Your core group members are or have experiences with:  
(Check only those that apply to your group members:)
- Indigenous (i.e., First Nations, Métis or Inuit)
  - Black
  - Racialized
  - Newcomer
  - Francophone
  - Two-spirit, lesbian, gay, bisexual, transgender, queer (2SLGBTQ+) youth
  - Living with disabilities or special needs
  - The justice system (have been in conflict with the law or are vulnerable to being in conflict with the law)
  - Child welfare (in care, leaving care, or were in care)
  - Not having enough money to meet basic needs (low-income)
  - The education system (dropped out of school or vulnerable to dropping out)
  - Living in rural or remote communities
  - None of the above

Grassroots work is about community-led and community inspired work. Shared identities and shared lived experience is critical to our understanding of the term 'grassroots'. This stream is a place for YOF youth to organize around issues they face, to imagine solutions, to test new ideas and to scale them. It is required that core group members share identities and experiences with the young people they hope to engage.

[IF Black selected]

- »» Is your group Black-led? (Check one only.)
- YES
- NO

Learn more about YOF's [definitions of Black Grassroots Groups, Organizations and Collaboratives](#).

[IF Indigenous selected]

- »» Is your group Indigenous-led? (Check one only.)
- YES
- NO

Learn more about YOF's [definitions of Indigenous Grassroots Groups, Organizations and Collaboratives](#).

- »» 10. Complete the Core Group Table. Describe the different roles and responsibilities people play, and the knowledge, lived experience, and skills they bring. If your group is an incorporated not for profit, you must include your board members in the core group table. Complete every column for every member of your core group. A core group member is someone who is playing or will play an active role in project related decision-making and planning, delivery of project activities, project administration, etc.

Name of Core Group Member	Email	Is the core member 29 years or under?	What role does this person play in the grassroots group? If your group is new, what role do you expect this person to play in the group?	Give us a sense of the lived experiences, volunteer experiences, knowledge and/or skills this person brings that are relevant to this project.
First & last name	xx@xx.com	Yes	Social media, outreach, and networking. This person will lead the effort to find an organizational mentor for us to work with.	Participated in community workshops on branding. Already really great at networking. I have lived in the community my whole life and am a mentor of other young Black women starting high school. This was something I didn't have growing up and wished I did. I think all of these experiences will help me with this project.

## TAB 4 - PROJECT IDEA

### Describing the Issue and Idea

11. Describe your group's idea. (Maximum 350 words)

[If shortlisted, you will not be able to change or update your response to this question.]

Describe what you will do, for whom, and where your work will happen.

»» 12. List and describe all core activities that your team will deliver for young people. [Maximum 400 words]

Provide more details about your core activities here. Describe the activities your group will deliver. Describe how will you deliver these activities? How often will you deliver these activities? How many youth do you intend to engage in each activity?

13. Why is your group interested in testing this idea? What needs or issues are you trying to address? (Maximum 350 words)

In answering this question, consider: What needs or issues are you trying to address? Are there things in your community you are interested in enhancing or protecting? Are there gaps you are trying to fill?

### Project Location

14. Where will project activities take place?  
(Check one only.)

- In the Greater Toronto Area (GTA)
- Outside the Greater Toronto Area (GTA)
- In both the GTA and outside of the GTA

GTA includes Toronto, Halton, Durham, Peel and York only. It does not include Hamilton. Select the region where the majority of your activities will take place. If your project will be delivered primarily online/virtually, check those regions that are most critical for the success of your project. For example, if your project will test a virtual platform for social connections between First Nations youth living in remote communities, check outside the GTA.

»» Where will project activities take place? Check all that apply.

Find your [catchment and census division](#).

- Northwestern
- Algoma, Cochrane, Manitoulin, Sudbury
- Muskoka, Nipissing, Parry Sound, Timiskaming
- Champlain (Ottawa region)
- Quinte, Kingston, Rideau
- Grand River
- Waterloo, Wellington, Dufferin
- Hamilton
- Niagara
- Grey, Bruce, Huron, Perth
- Essex, Kent, Lambton
- Thames Valley
- Halton-Peel
- Simcoe-York
- Durham, Haliburton, Kawartha, Pine Ridge
- Toronto

»» 15. Please select the census divisions to indicate more specific regions where your project activities will take place. (Select at least one.)

Pick the community where your group will be working and will have greatest impact.

- |  |   |   |
|--|---|---|
| <input type="checkbox"/> Algoma            | <input type="checkbox"/> County of Perth                                    | <input type="checkbox"/> County of Frontenac                  |
| <input type="checkbox"/> Sudbury           | <input type="checkbox"/> Regional Municipality of Niagara                   | <input type="checkbox"/> County of Hastings                   |
| <input type="checkbox"/> Cochrane          | <input type="checkbox"/> Hamilton   | <input type="checkbox"/> County of Lanark                     |
| <input type="checkbox"/> Manitoulin        | <input type="checkbox"/> County of Elgin                                    | <input type="checkbox"/> United Counties of Leeds & Grenville |
| <input type="checkbox"/> Greater Sudbury   | <input type="checkbox"/> County of Middlesex                                | <input type="checkbox"/> County of Lennox & Addington         |
| <input type="checkbox"/> Muskoka           | <input type="checkbox"/> County of Oxford                                   | <input type="checkbox"/> Prince Edward County                 |
| <input type="checkbox"/> Nipissing         | <input type="checkbox"/> Ottawa   | <input type="checkbox"/> Regional Municipality of Halton      |
| <input type="checkbox"/> Parry Sound       | <input type="checkbox"/> United Counties of Prescott & Russell              | <input type="checkbox"/> Regional Municipality of Peel        |
| <input type="checkbox"/> Timiskaming       | <input type="checkbox"/> County of Renfrew                                  | <input type="checkbox"/> County of Simcoe                     |
| <input type="checkbox"/> Kenora            | <input type="checkbox"/> United Counties of Stormont, Dundas, and Glengarry | <input type="checkbox"/> Regional Municipality of York        |
| <input type="checkbox"/> Rainy River       | <input type="checkbox"/> Regional Municipality of Durham                    | <input type="checkbox"/> County of Dufferin                   |
| <input type="checkbox"/> Thunder Bay       | <input type="checkbox"/> Kawartha Lakes                                     | <input type="checkbox"/> Regional Municipality of Waterloo    |
| <input type="checkbox"/> Essex County      | <input type="checkbox"/> County of Northumberland                           | <input type="checkbox"/> County of Wellington                 |
| <input type="checkbox"/> Chatham-Kent      | <input type="checkbox"/> Peterborough                                       | <input type="checkbox"/> Toronto                              |
| <input type="checkbox"/> County of Lambton | <input type="checkbox"/> County of Haliburton                               |   |
| <input type="checkbox"/> County of Brant   |   |   |
| <input type="checkbox"/> Haldimand-Norfolk |   |   |
| <input type="checkbox"/> County of Bruce   |   |   |
| <input type="checkbox"/> County of Grey    |   |   |
| <input type="checkbox"/> County of Huron   |   |   |

16. Please select the community size that is the primary focus of your grant.

(Select one.)

- Rural or Small Communities (20,000 or less)
- Mid-size Communities (20,001 - 100,000)
- Urban Centres and Metropolitan Suburbs (100,000+)

## Upload Supporting Documents

Upload pictures or diagrams (optional).

You may upload as many as five (5) pictures or diagrams, or provide a link to pictures, that will provide greater explanation of your initiative. Please include a short description for each picture.

## TAB 5 - PROJECT IMPACT

### Describing the Outcome and Beneficiaries

- »» 17. Select the **YOF Priority Outcome** that most aligns with the change you want to make through this project (Check one only).
- Empowering girls and young women to lead, including women's economic empowerment initiatives.
  - Supporting Indigenous, Black, and/or newcomer youth to enter the labour market and transition to sustainable career pathways.
  - Provide mentorship opportunities for youth in and leaving care and/or youth involved in the justice system.
  - Addressing racism and its impacts on youth in urban, rural and/or Northern communities.
  - Supporting youth who are not connected to education programs, employment programs, and training programs (i.e. NEET) to exit poverty and social assistance
  - Creating safe spaces for Indigenous and/or Black youth to build strong community and cultural connections.
- »» 18. Identify the population(s) that are the primary beneficiaries of your project using the list below. (Select at least one.)
- Indigenous youth (i.e., First Nations, Métis and/or Inuit)
  - Black youth
  - Racialized youth
  - Newcomer youth
  - Francophone youth
  - Two-spirit, lesbian, gay, bisexual, transgender, queer (2SLGBTQ+) youth
  - Youth living with disabilities or special needs between the ages of 12 to 29
  - Youth living in rural, remote and/or Northern communities

- Youth in conflict or at risk of being in conflict with the law
- Youth in care or leaving care
- Youth in low-income situations or from low-income families
- Youth who are homeless or at risk of being homeless
- Youth at-risk of dropping out or have dropped out

[IF Indigenous selected]: Select at least one.

- First Nations youth
- Métis youth
- Inuit youth

»» 19. Please select the age range of youth who will participate in your project activities:

(Select at least one.)

- 12 to 14 years
- 15 to 19 years
- 20 to 25 years
- 12 to 29 years for youth living with special needs

When you designed your project, which age group did you have in mind? Check only those age groups you will intentionally reach out to and engage. Please be focused in your selection.

20. Tell us more about the primary beneficiaries you will engage through this project. What are their lived experiences? How are they affected by the issues you would like to address? [Maximum 300 words]

## Describing the Impact

»» 21. What are the most important changes you expect to see in your selected **YOF youth**? Focus on sharing changes that can be achieved through your project. Identify three to six changes. (50 words max for each change)

- Change 1 (required)
- Change 2 (required)
- Change 3 (required)
- Change 4 (optional)
- Change 5 (optional)
- Change 6 (optional)

Some changes can happen almost immediately, and others can take a little longer to happen. Some examples of immediate changes are changes in knowledge, skill levels or attitudes about oneself and others. Other types of changes may take longer. For example, changes in behaviour, relationships or leadership. Use change words such as: increased, enhanced, strengthened, improved, expanded, prevented, reduced etc. After you write your change statements, take a final look to make sure you can achieve all of these through your project activities. **IF YOU ARE APPLYING TO DO RESEARCH**, use the Impact Table to describe both changes that young people will experience through their participation in the research process and the longer-term benefits of this research.

**Example:** More young people will be able to access community supports that meet their needs. In the beginning they will access services with the support of their mentor but over time they will navigate supports on their own.

**Example:** Youth-led research into the best ways to support young people transitioning out of care will help to ensure housing and employment services are more relevant and effective, and therefore used by young people.

»» 22. How many youth do you expect to **directly impact** through the life of your grant? # \_\_\_\_

Only include the number of youth who will participate in your project activities. If conducting a research project, only include the young people who make up the project's research team (including group members, researchers, analysts, and any youth who plays a consistent and significant role in your research project). Only count a young person once even if you will have multiple touchpoints with them. If approved for funding, this number will be included in the Grant Contract.

**Example:** You have funding for 2 years. Your project runs on a 10-week cycle. You plan to have 15 youth participate in each cycle. You plan to deliver 2 cycles per year. The number of youth you will directly impact is 60 (15 youth x 2 cycles per year x 2 years of funding).

## TAB 6 - PROCESS

### Request term

#### IF TEST SELECTED

»» 23. What is the request term? Check one only.

- 1 year
- 2 years
- 3 years

This is the total number of years you will receive funding if your application is approved.

## Project Plan and Budget

Please build your Project Plan and Budget Worksheet with the following start date in mind. Project Start Date: **March 1, 2023**

### »»» 24. Complete the Project Plan template.

The Project Plan is a tool to plan all the major activities and milestones in your project. Try to anticipate all the major activities and milestones. Take your time working on this as it will help you complete the budget. If you are not sure how to fill this out, look at an [example Project Plan](#). You can also email us at [yof@otf.ca](mailto:yof@otf.ca).

### »»» 25. Complete the Budget Worksheet template.

The Budget Worksheet is a tool to budget for all expenses in your project. Try to anticipate all the expenses. **Note that a minimum of \$ 4000 per year and maximum of \$ 6000 per year can be spent on capacity building. Please avoid any quotation marks (“...”)** in the **Budget fields (including Notes) as the system will not save your work if these are detected**. If you are not sure how to fill this out, look at an [example Budget Worksheet](#). You can also email us at [yof@otf.ca](mailto:yof@otf.ca).

### »»» 26. Based on your completed Budget Worksheet, you are requesting: \$ \_\_\_\_\_

## TAB 7 - ORGANIZATIONAL MENTOR (OM) INFORMATION

### OM Name and Contact Information

27. Has your group identified an OM for this project? (Check one only.)

- YES
- NO

[IF NO]: Do you need information or support to find an OM? (Check one only)

- YES
- NO

### »»» [IF YES]: What is the name and contact information of the organization that has agreed to be your OM?

Organization Name: \_\_\_\_\_

Contact Name and position: \_\_\_\_\_

Telephone: \_\_\_\_\_

Email: \_\_\_\_\_

## EXPRESSION OF INTEREST ASSESSMENT SCORECARD

OTF staff will use this standard scorecard to assess your EOI. This scorecard is a tool to guide you as you write your EOI.

<b>Assessment Area 1: GROUP ELIGIBILITY</b>	
Project leaders reflect the identities and experiences of those YOF youth they are working with and for.	YES NO
Does the group operate as either youth-led or a youth-adult partnership?	
Does the group exist independent of a larger organization?	
Is the group based in Ontario?	
Does the group have at least three core members?	
Does the group agree to work with an OM?	
Is the group either an unincorporated group or an incorporated not-for-profit corporation, with independently managed revenues of \$50,000 or less in either of the last two years?	
<b>Assessment Area 2: PEOPLE</b>	
<p><b>Strong Youth Leadership</b></p> <input type="checkbox"/> The group fully operates as a youth-led group or a youth-adult partnership <input type="checkbox"/> The group demonstrates that collectively they have the right mix of knowledge, skills and experience to deliver this project.	40%
<b>Assessment Area 3: STRATEGY</b>	
<p><b>Setting the Context (Issue &amp; Idea)</b></p> <input type="checkbox"/> The group has fully and clearly described the IDEA they want to test or the RESEARCH they will conduct, or the STRATEGY work they will lead. <input type="checkbox"/> The need, issue or opportunity connects to systemic barriers that YOF youth face. <input type="checkbox"/> The idea is an effective response to the need, issue or opportunity the group is addressing <input type="checkbox"/> The idea responds well to the context and experiences of the young people that they are engaging through this project.	60%
<p><b>Potential for Impact (Idea &amp; Impact)</b></p> <input type="checkbox"/> YOF youth are clear and direct beneficiaries of the project. <input type="checkbox"/> The changes the group hopes to make can be achieved through their project idea. <input type="checkbox"/> The changes or impacts the group hopes to make aligns with their chosen YOF Priority Outcome	