# Invasive Mussels Lake Monitoring FundPart 1: Application Form

# *Project number # (HCTF to complete)*

Please review the Invasive Mussels Lake Monitoring Fund Grant Guidelines & Application Instructions and the *British Columbia Dreissenid Mussel Lake Monitoring Field Protocol* prior to completing this form. We will review your answers below to ensure you have read and understand the protocol, so please be descriptive in your answers.

This form must be accompanied with Part 2: Budget and Sampling list (Excel Spreadsheet); please complete both tabs on the spreadsheet.

1.0 Basic Project and Contact Information

# Project Title: *Enter Project Title here*

|  |  |
| --- | --- |
| Amount Requested from HCTF:*Should match amount in budget table in Part 2(a))* |  |
| Waterbody/ies proposed for sampling: |  |
| Project Leader Name: |  |
| Organization Name: |  |
| Mailing address: |  |
| Phone number(s): |  |
| Email: |  |

2.0 Proponent Information

2.1 Provide a short description of your organisation, e.g., type (government, NGO, community group), mandate, history:

* 1. Describe your experience with water quality sampling, explaining how your skills and experience and capacity will allow you to successfully undertake the proposed activities.
1. Project Details

3.1 Provide your expected timeline for the season: expected start date and end date of the sampling season.

3.2 Provide a list of waterbodies you wish to sample from the provided waterbody list for plankton tow sampling, selected sample sites within each waterbody and a justification for the sampling sites selected. This section should complement the information provided in Part 2.

|  |  |  |
| --- | --- | --- |
| Waterbody | Sample Site | Justification |
|  |  |  |
|  |  |  |
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|  |  |  |

3.3 Provide an explanation if there are any variances in your selected waterbodies or sampling frequency compared to the recommendations in the protocol including the priority waterbody list.

3.4 Describe your sample preservation methods, including the preservative you plan to use.

* 1. Describe ancillary data you plan to collect and equipment to be used.
	2. Describe your decontamination protocol.
	3. Describe any partnerships you have with other organizations, consultants, government etc. that may be assisting with this work and in what capacity. Also, any discussions you may have undertaken with other organizations in your region who may also be applying for funding under this program. Note that a list of last year’s grant recipients is included on the HCTF website.

4.0 Checklist and Submission Instructions

Please ensure you include the following with your application:

Required:

* Part 1 Application Form (as word document or PDF)
* Part 2 Budget and Sampling List (Excel Spreadsheet)

Optional, but recommended:

* Letters of support

Send your application to Shannon West at shannon.west@hctf.ca by **4:30 pm on February 3rd, 2021**. Please provide the spreadsheet as an excel file, and the main application form as a word document or PDF. If your files are too large to send as email attachments (larger than 10MB), please contact Shannon West at 250-940-9789. We will confirm via email when your application has been received.