



BIGSTONE CREE NATION

TRUST PROPOSAL APPLICATION

PART A – Information About You

Date: January 15, 2026

The following information is essential for approval and for **BCN Trust Administration** to contact you.

Project Director: Lorna Auger

Treaty No [REDACTED]

Address: P.O Box 960

City/Town: Wabasca Alberta

Province: Alberta

Postal Code: T0G 2K0

Telephone Number: (780) 891-3836 **Cellular Phone:** (780) 319-9696

Fax Number: (780) 891-3888

Email address: lorna.auger@bigstone.ca

Which Trust classification are you applying to access funding?

(Check off only one Trust Fund category, with amount requested for that category)

Please note that all application submissions need to be in by
January 15, 2026 at 11:59 pm, no exceptions.

(It is recommended to submit all proposals 5 business days prior to deadline)

Bigstone Cree Nation Department ☒

Members at Large/Committee ☐

BCN Trust ☐ Off-Reserve Members ☐ Calling Lake ☐ Chipewyan Lake ☐ Wabasca/Desmarais ☒

Team Member	Position on Team	Roles and Responsibilities	Signing Authority
Lorna Auger	Team Lead Administrator	Supervisor and Administrator	☒
Raven Cardinal	E.A to Administration	Assistant	☒
Val Danyluk	Admin Support	Assistant	☒

Part B – Information About Your Project

IMPORTANT

Please note that this form is required for formal reviews of the project by the Trustees and Chief & Council and from time-to-time, Bigstone Cree Nation Members. It is also necessary if the Accountable Body is requested to make decisions that materially affect the project, including changes or modifications to the



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original plan. It is the responsibility of the Project Director to complete the form, assisted by the Project Team or Society/Committee.

Executive Summary

Title of your proposal: 2026 Elders Quality of Life Improvements

Project

Project Start Date: July 31 2026 **Expected end date:** July 31 2027

Executive Summary

This Summary gives the reader a concise overview of the project's purpose; the team's research; progress; and process of the project. Summarize the importance of the project and its main objective.

Elders require additional supports that are not always thought of. They are living on a pension with the cost of living so high. Some Elders do not have the financial support from their families to assist if their appliance should it need to be replaced. Or if a simple screen/window/door needs to be replaced so they can feel safe and secure at night.

*Add additional sheets as needed

Description Describe the nature of the project, it's overall goal and value to the Membership and to the Community. Be concise and brief without sacrificing the necessary details. Start your message with a brief introductory sentence followed by bullet points to highlight the purpose of the project.

The Elder Home Safety & Quality-of-Life Improvement Program is designed to support elder in maintaining safe, healthy, and dignified living environments. Many elders in our community face challenges related to aging homes, limited income, and reduced mobility. This program seeks funding to provide essential home upgrades—such as **new appliances, energy-efficient windows, and secure exterior doors**—that directly enhance safety, comfort, and independence.

*Add additional sheets as needed

Goals of your proposal

You should provide data that describes relevant statistics and qualitative observations that outline the requisites of your project. Make it easy for the reader to understand why your project is important, how it is uniquely suited to address a specific challenge/barrier and how it will meet the needs of Membership and the Community.

Bigstone Cree Nations role is to ensure the members needs are met and the departments are tasked to ensure this task is met, however due to lack of funding, supply and demand of programs and funding are not always met. A



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significant number of elders live in older homes that no longer meet basic safety or accessibility standards. Common issues include:

- Outdated or malfunctioning appliances that pose fire or electrical hazards
- Drafty or damaged windows that increase heating costs and reduce comfort
- Worn or insecure doors that compromise personal safety
- Limited financial resources preventing elders from making necessary repairs
- Minor safety repairs such as grab bars, smoke detectors, and improved lighting

These conditions increase the risk of accidents, illness, and social isolation. By addressing these needs, the program will help elders remain safely in their homes for longer.

Target Timelines and outcomes for each Quarter (provide a brief summary):

July-September

Assist 25 elders with requests for quality of life improvements

October-December

Assist 25 elders with requests for quality of life improvements

January-March

Assist 25 elders with requests for quality of life improvements

April-June

Assist 25 elders with requests for quality of life improvements

*Add additional sheets as needed

Result:

Evaluation Plan: What results do you expect to achieve over the course of the project? How will you know when the project is completed that your goals and objectives have been met?

Until funds are depleted. One time help.

List the resources needed for the project:

Describe the manpower, tools and resources being utilized to achieve the goals of the project.



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- Briefly describe the activities and methods you/your team will employ to achieve your goals and objectives.

Which departments will oversee specific aspects of the plan and what programs or information are they using?

- What results do you expect to achieve?
- What criteria will you be using to measure success?
- Will you be subcontracting out? Briefly describe who, when, where, why and how?
- The reader should be able to understand who manages certain deliverable.
- **Members at Large will need WCB and Insurance to undergo Trust Proposal Projects.**

BCN employee will take the calls and establish the plan. Investing in elder home safety is an investment in community well-being. This program will ensure that seniors—who have contributed so much throughout their lives—can continue to live safely, comfortably, and independently. Funding will directly improve quality of life and reduce long-term social and healthcare costs.

*Additional sheets as needed

Project End Evaluation by the Administrator:

- **Reduced risk of home accidents**
- **Lower utility costs** due to improved energy efficiency
- **Increased sense of security** for elders living alone
- **Improved physical and mental well-being**
- **Stronger community support systems**

Indicate below which category your proposal request falls under:

- | | |
|--|-------------------------------------|
| • Community Development ** | ☒ |
| • Health Care | ☒ |
| • Education and Training | ☐ |
| • Elder Care | ☒ |
| • Infrastructure improvement | ☐ |
| • Preserving culture and language | ☐ |
| • Community activities | ☐ |
| • Economic development | ☐ |
| • Cultural enrichment | ☐ |
| • Protection of aboriginal identity and Treaty Right | ☐ |



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****If you have chosen *Community Development*, which additional categories does your proposal request fall under?**

- Improve health and well-being (emotional, physical, mental, spiritual) **x**
- Benefits from improving awareness of culture, traditions, identity **x**
- Networking-building relationships with the community and outside the community ☐
- Creating temporary jobs ☐
- Occupational training and development of infrastructure ☐
- Opportunity for creating greater economic independence ☐

What research and/or studies have you/your team completed to determine the requirements of membership or the community, that this proposal will provide?

Elders are calling the office for assistance for appliances. There is no current funding available.

*Add additional sheets as needed

Projected Budget

How much money are you/your team requesting with this proposal? \$100,000

Have you included a Cash Flow budget? Yes ☒ No ☐

If you checked off “no” please explain why you didn’t submit a Cash Flow budget?

2026 Elders Quality of life Improvements		
100 elders	\$1000 maximum	\$100,000
Total Budget		\$100,000

*Add additional sheet as needed

Have you/your team approached any other funding agencies prior to approaching BCN Trusts?

Yes ☐ No ☒

If you checked off “yes”, please provide the details of the request, what amount was negotiated and what amount was approved. If the request was denied, please explain why it was denied.



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*Add additional sheets as needed

Is the funding request from BCN Trusts to be used with any other funding source(s) or partner(s)?
Yes ☐ No ☒

If you checked off "yes", identify the funding source or partner: _____

What is the % breakdown of funding from other source(s) or partner(s)?

_____	%	_____
_____	%	_____
_____	%	_____

Quarterly Report

If you/your team do not submit the first (1st) quarterly report within the first three (3) months of starting the project and subsequent quarterly reports thereafter until the conclusion of the project, your funds may be suspended indefinitely at the phase, the delinquency had been committed.

Definition

Quarterly means every three (3) months.

Summary/Evaluation Report:

It is equally important to submit the final Summary/Evaluation report at the end of the project.

IMPORTANT to KNOW

BCN Trusts will no longer tolerate negligence, procrastination and non-compliance.

1. The consequence for irresponsible acts of postponement, may be a "rejected proposal" by the Trustees and Chief & Council because of non-performance.
2. It is equally important to RETURN assets (property/equipment etc.) back to Bigstone Cree Nation when such items are purchased with BCN Trust funding, at the end, of the project.
3. Trust Administrator will conduct a Project End Evaluation Report.

When the Project Director undertakes to coordinate a project, it is his/her responsibility to comply with the requirements of the program and to ensure that his/her Team conforms.

BCN Trusts is responsible to Membership, the Trustees and to Chief & Council.

Lorna Auger

Print Name

L. Auger

Signature

Incomplete applications will not be accepted.