



Section reserved for Health Canada personnel

File number :		Date of application :	
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Letter of intent (LOI) Application Form
Official Languages Health Program (OLHP)
2018-2023

1. Applicant information

Project title					
Proposed duration of the project in months		Total funding requested :			
Year 1:	Year 2:	Year 3:	Year 4:		
Full legal name of the applicant organization:					
Address:					
City:		Province :		Postal code	
Business Number:					
Name and title of the project contact:					
Telephone :		E-mail address :			

2. Project summary

Please describe your initiative and indicate how it relates to funding priorities as set out in Section 2 of the Applicant Guide. Also indicate also how your initiative meets the principles listed in Section 3 of the Applicant Guide (Evidence, Innovation, Multi-sectoral collaboration, Sustainability, Cultural Sensitivity and Sex and Gender Based Analysis).

General description and relation to funding priority

Use of evidence

Innovation

Multi-sectoral collaboration

Sustainability

Cultural sensibility

Sex and Gender Based Analysis

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Name (in print):			
Signature			
Position title		Date:	