

INSTRUCTIONS

1. Eligible program expenses must occur between **April 1, 2017 - March 31, 2018**.
2. Please complete form electronically, and **DO NOT FILL OUT BY HAND**. Use Internet Explorer or Firefox and the most current version of Adobe Acrobat.
3. Only use the application forms provided; however, if providing additional information please reference attachment material appropriately.
4. Grant recipients are required to submit completed *Accountability Reporting Forms* for each *YRAC Funding Category*.
5. Ensure the declaration is signed by the president and other authorized individual.
6. Please submit the completed forms and supporting documents to:

Physical address: Yukon Sport & Recreation Administration Building
4061 - 4th Avenue, Whitehorse

By mail: Government of Yukon
Sport & Recreation Branch, C-10
Box 2703
Whitehorse YT Y1A 2C6

By fax: We will not be accepting faxed documents due to poor quality

By email: Scanned (signed) documents are acceptable by email

For more information: Trevor Twardochleb, Sport Consultant
Telephone: (867) 667-5606
1-800-661-0408 (ext. 5606) toll-free
trevor.twardochleb@gov.yk.ca

YS4L FUNDING PROVIDED BY

Yukon Government, Community Services, Sport and Recreation Branch
and the Government of Canada

ACCOUNTABILITY REPORTING DEADLINE: APRIL 20, 2018



**YS4L
ACCOUNTABILITY REPORTING FORM
PROJECT DETAIL**

Note: Please fill out one sheet per category; please do not combine categories on one accountability reporting form. Combine all projects under each category and fill out the form (i.e. under Athlete Development combine all camps together and report on one accountability form)

Sport governing body:				
Funding year (April 1, 2017 - March 31, 2018):				
Initiative (check one)	<input type="checkbox"/> Enhanced athlete development <input type="checkbox"/> Rural/aboriginal participation <input type="checkbox"/> Coaching enhancement	Note: Coach salary subsidy is a different form		
PROJECT DETAIL				
Description of project (provide names of athletes & coaches who took part in initiative):				
Contact:		If Rural/Aboriginal Initiative; is it in collaboration with YASC? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Location:		Date/Duration:		
NUMBER OF ATHLETES OR COACHES IN ATTENDANCE				
	Male	Female	Aboriginal male	Aboriginal female
Athletes				
Coaches				
Objective(s):				
Was it Successful? In what way/why not? (Please provide a critical analysis of this project and indicate whether you would do it again)				

REVENUES

Description of revenue	Amount
Total revenues	

MAJOR EXPENSES – Note: Receipts may be requested for verification purposes

Description of expense	Amount
Total cost of initiative	
YRAC grant (your total expenses should exceed your funding)	

AUTHORIZED REPRESENTATIVE

I certify that the financial information described in this form were incurred and applied as set out in the approved funding application. I also understand that further documentation may be requested from Yukon Government at any given time with respect to the YS4L Funding.

YSGB signature:	Name:
	Position:
	Date:

YUKON GOVERNMENT/SPORT & RECREATION OFFICE USE

Signature:	Date:
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ACCOUNTABILITY REPORTING DEADLINE: APRIL 20, 2018



Sport governing body:		
Funding year (April 1, 2017 - March 31, 2018):		
Initiative: COACH SALARY SUBSIDY		
YEAR END REPORT FOR COACHES		
What was your employment arrangement? <input type="checkbox"/> Full-time <input type="checkbox"/> Part-time <input type="checkbox"/> Seasonal		What was your job title?
What were your major responsibilities?		
What would you consider your successes and highlights?		
What percentage of time did you spend in the following areas?		
• Coaching athletes directly _____ %	Planning _____ %	Other (please specify) _____
• Mentoring other coaches _____ %	Meetings _____ %	_____
• Delivering NCCP _____ %	Administration _____ %	_____ %
What are your greatest challenges in coaching in Yukon?		
What recommendations do you have concerning this program?		
Do you have any other comments?		
SUBMITTED BY:		
Name:	Position:	
YSGB Signature:	Date:	
YUKON GOVERNMENT SPORT AND RECREATION BRANCH (ONLY)		
Name of Approver:		Date:
Signature:	Comments:	