



YORK CATHOLIC DISTRICT SCHOOL BOARD Partnership Application

PART 1 – General Information

Date: _____

Name of Organization: _____

Name of Applicant: _____

Address: _____

City: _____ Postal Code: _____

Phone: _____ Fax: _____

Email Address: _____

Website (If Available): _____

PART 2 – Background Information

Briefly describe your Organization:

What is your company's Mission Statement/ Purpose?

PART 3 - Requirements

What school(s) are you interested in?

What is your intended use of this space?

Service to be provided: _____

Hours of Operation: _____
(Specify if include M-F 6:00pm-10:00pm, Weekends)

Space Requirements: _____

Number of Occupants
Staff: _____
External Clients: _____

Parking Requirements:

Staff: _____ Clients: _____

Requested Length of Term: _____

Is your organization considered For Profit or Not for Profit?: _____

Briefly describe how this proposed use may be a benefit to the students and school community

Part 4 – Financial

Provide a letter of good standing and total financial limit from a nationally recognized financial institution

Do you have capital contributions available for any required renovations?:

All Staff will be required to complete a Criminal Background Check.

Please submit the completed form to the attention of:

Christine Hyde, Senior Planner

Email: christine.hyde@ycdsb.ca

Mailing Address: York Catholic District School Board, 320 Bloomington Road West, Aurora ON L4G 0M1