Advancing Accessibility Standards Research Program

Expression of Interest Form

# Before you begin

* Ensure you have read and understand all eligibility and program requirements.
* This form includes a series of questions asking you to describe your proposed project. Please answer all the questions. Be as concise as possible with your responses, but don’t leave out any important information.
* Review all questions before answering them to make sure you can provide all the information required.

**You must complete this form in full.** Your expression of interest may be refused if it has errors or information is missing.

**You must submit this form on or before the deadline**. Your expression of interest may be refused if it is submitted after the deadline.

# How we use the information you provide

By completing this form, you are providing information voluntarily.

We will use this information to assess your submission. We may also use it to support related program activities such as policy analysis, research, and evaluation.

We may discuss your project with other federal government departments and organizations. To help evaluate your expression of interest, we may share project details with outside experts. For example, they may help us assess how your project addresses a gap or will help inform a relevant subject area.

# Protection of personal information

The use or sharing of your personal information will not affect your relationship with this department or any other government organization.

Your personal information will be managed in accordance with the [*Privacy Act*](https://laws-lois.justice.gc.ca/eng/acts/p-21/FullText.html) and other relevant laws. You have the right to:

* access your personal information
* ask for corrections if you think there is an error or an omission

Questions, concerns, or complaints about how we apply the *Privacy Act* and privacy policies can be sent to Accessibility Standards Canada’s Privacy Coordinator:

* by email: Info.Accessibility.Standards-Normes.Accessibilite.Info@asc-nac.gc.ca
* by phone: 1-833-854-7628
* by mail:

Privacy Coordinator
Accessibility Standards Canada
320 Boulevard St. Joseph, Suite 246
Gatineau QC K1A 0H3

If you are not happy with our response to your privacy-related questions, concerns, or complaints, you may contact the [Office of the Privacy Commissioner of Canada](https://www.priv.gc.ca/en/report-a-concern/).

# Your right to access information

Your expression of interest submission is subject to the [*Access to Information Act*](https://laws-lois.justice.gc.ca/eng/acts/a-1/page-1.html). The Act gives every person the right to access information under the control of a government agency, with some exemptions.

* [Instructions for accessing information](https://www.canada.ca/en/treasury-board-secretariat/services/access-information-privacy/access-information/information-about-programs-information-holdings/standard-personal-information-banks.html)

Expression of Interest Form

Please answer all the questions in this Expression of Interest Form. Make sure you respect the word limit for each question, if there is one.

# Part 1: Organization

## Information about your organization

1. Legal name of organization. This is usually the name on file with the Canada Revenue Agency or a provincial or territorial equivalent. It may also appear on funding cheques.

Click here to insert your answer.

1. Operating (or common) name of the organization (If different from the legal name).

Click here to insert your answer.

1. Business or Canada Revenue Agency registration number. This is a 15-digit number issued by the Canada Revenue Agency. For example, 123456789 RR 0001. Please specify which number you are providing.

All registered charities and non-profits are issued a registration number. You can find it on tax-related documents. It will also appear on written communications from the Canada Revenue Agency. For more information, [visit the Canada Revenue Agency website](http://www.cra-arc.gc.ca/menu-eng.html).
Click here to insert your answer.

**No number?**

If you do not have a business or registration number, please include one of the following documents when you submit your expression of interest.

If the organization is **not incorporated**, provide a copy of one of the documents listed below with your expression of interest:

* your rules
* your by-laws
* your council resolutions
* your constitution

If the organization is **incorporated**, provide a copy of one of the documents listed below with your expression of interest:

* the letters of patents
* the articles of incorporation
* the certificate of incorporation
* the memorandum of association
* your rules, by-laws, or constitution
1. Organization type. Choose the type that best describes your organization. Choose only one answer.

[ ]  research or educational institution (such as a university)

[ ]  not-for-profit organization

[ ]  Indigenous organization, including:

* + band council
	+ tribal council
	+ self-governing organization

[ ]  municipal (local) organization

[ ]  provincial or territorial organization (excluding provincial or territorial governments)

1. Is your organization a national organization, as per the definition below? Choose only one answer.
National organization: An organization with a national mandate and that conducts activities in 4 or more provinces or territories. It may work in partnership with other organizations or have offices in different provinces or territories.

[ ]  Yes

[ ]  No

1. Is your organization a disability organization? A disability organization prioritizes disability advocacy, research, and products. Choose only one answer.

[ ]  Yes

[ ]  No

1. What is your organization’s main language of operations. Choose only one answer.

[ ]  English

[ ]  French

[ ]  Fully bilingual

1. Address of organization. Give a complete physical street address that includes the city, province or territory, and postal code. Use a format recognized by Canada Post. Visit the [Canada Post website](https://www.canadapost.ca/web/en/home.page) for more information.
	1. Street: Click here to insert your answer.
	2. City/town/village: Click here to insert your answer.
	3. Province/territory: Click here to insert your answer.
	4. Postal Code: Click here to insert your answer.
	5. Country: Click here to insert your answer.

## B. Contact information

Primary contact. This is the person responsible for completing this form. All correspondence regarding this expression of interest will be sent to this person.

1. First and last name

Click here to insert your answer.

1. Position title

Click here to insert your answer.

1. Telephone number

Click here to insert your answer.

1. Email address

Click here to insert your answer.

1. Preferred language for written communication. Choose one.

[ ]  English

[ ]  French

1. Preferred language for spoken communication. Choose one.

[ ]  English

[ ]  French

# Part 2: Project information

Please consult the [Call for expression of interest page](https://accessible.canada.ca/advancing-accessibility-standards-research/funding) to help you complete this section.

1. Provide a short title that describes your project.

Click here to insert your answer.

1. Planned project start date (yyyy-mm-dd)

Click here to insert your answer.

1. Planned project end date (yyyy-mm-dd)

Click here to insert your answer.

1. This call for expressions of interest is meant to address specific priority areas. Which of these area(s) will your research address? Consult the [Call](https://accessible.canada.ca/advancing-accessibility-standards-research/funding) for expression of interest page and name all the priorities that apply.

a) Main priority area (indicate one):

Click here to insert your answer.

b) Secondary priority area(s) (indicate all that apply):

Click here to insert your answer.

Click here to insert your answer.

Click here to insert your answer.

Click here to insert your answer.

Click here to insert your answer.

Click here to insert your answer.

Click here to insert your answer.

Click here to insert your answer.

Click here to insert your answer.

Click here to insert your answer.

1. In no more than 200 words, provide a short description of your project. We must be able to understand what your project is about, why your research is needed, and the project’s goals and objectives.

Click here to insert your answer.

1. In no more than 200 words, tell us how your project will inform the development of next-generation model accessibility standards in federal areas of responsibilities.

Click here to insert your answer.

1. In no more than 200 words, tell us:
* what disability or disabilities your research will address
* how your project will identify, remove, and/or prevent barriers to accessibility related to your identified disabilities

Click here to insert your answer.

1. In no more than 200 words, tell us how you will involve persons with disabilities in your project. For example, will they be:
* members of the research team
* members of an advisory committee
* taking part of the planning and delivery of the project
* participants in the research, for example through surveys or focus groups

Click here to insert your answer.

1. In no more than 300 words, tell us how you will involve partners in your research. Please share with us:
* the sectors and disciplines you are targeting for potential partners
* the names of potential partners you may have identified (note that partners are not expected to be fully secured at the expression of interest stage)
* what roles your partners will play in the project

See the mandatory requirements for partnerships in the [Call for expression of interest page](https://accessible.canada.ca/advancing-accessibility-standards-research/funding).

Click here to insert your answer.

# Part 3: Budget estimate

1. Please indicate how much funding your proposed project will require from Accessibility Standards Canada. Consult the [Call for expression of interest page](https://accessible.canada.ca/advancing-accessibility-standards-research/funding) for the maximum project funding you can request per fiscal year, and a list of eligible expense categories to help you estimate this. For the purpose of this program, a fiscal year starts on April 1 and ends on March 31 of the next year.
2. Fiscal year 1: Click here to insert your answer.
3. Fiscal year 2: Click here to insert your answer.
4. Fiscal year 3: Click here to insert your answer.
5. Total amount: Click here to insert your answer.

# Part 4: Attestation

To be eligible for this funding opportunity, you must certify the accuracy of the information you have provided.

Please attest to each of the following statements:

[ ]  I am the official representative for this expression of interest.

[ ]  My organization has given me the authority to submit this expression of interest.

[ ]  I certify and warrant for my organization and in my personal capacity that all the information I have provided is true, accurate, and complete.

Name of official representative: Click here to insert your answer.

Position title: Click here to insert your answer.

Date (mm-dd-yyyy): Click here to insert your answer.

**Please carefully review all the information you have provided before you submit this form.**