Declaration

CAPACITY DEVELOPMENT PLAN

Note ▶ This template is for use by the following departments: Crown-Indigenous Relations and Northern Affairs Canada (CIRNAC) and Indigenous Services Canada (ISC).

Privacy Statement This statement explains the purposes for the collection and use of personal information needed to respond to program requirements will be requested. Collection and use of personal information are in accordance with the Privacy Act (https:// laws-lois.justice.gc.ca/eng/acts/P-21/index.html). In some cases, information may be disclosed without your consent pursuant to subsection 8(2) of the Privacy Act. The collection and use of your personal information for the Governance Capacity Programs are authorized by the Department of Indigenous Services Act (S.C. 2019, c. 29, s. 336) (https://laws-lois.justice.gc.ca/eng/acts/I-7.88/index.html), the Department of Crown-Indigenous Relations and Northern Affairs Act (S.C. 2019, c. 29, s. 337) (https://laws-lois.justice.gc.ca/eng/acts/I-7.88/index.html). justice.gc.ca/eng/acts/C-49.8/index.html) and s. 122 (1), 123 (1) and 124 (1) of the Financial Administration Act (https://laws-lois.justice.gc.ca/eng/acts/F-11/page-1.html) and required for your participation. We will use your personal information for evaluation purposes in order to respond to your Capacity Development Plan. The information collected is described in Personal Information Bank AANDC PPU 300, detailed at Info Source (https://www.sac-isc.gc.ca/eng/1639748667069), and will be retained for a period of 30 years and then the records are transferred to the Library and Archives Canada. As stated in the Privacy Act, you have the right to access your personal information and request changes to incorrect information. Contact the departmental Public Enquiries Contact Centre at 1-800-567-9604 to notify us about incorrect information. For more information on privacy issues and the *Privacy Act* in general, you may consult the Privacy Commissioner at 1-800-282-1376. Planning Horizon: Year 1 (YYYY) Year 5 (YYYY) Identification Recipient Name Recipient Number Contact Given Name Family Name Title Telephone Number **Email Address Plan Information** Costs; Indicators; and Expected Outcomes. The following is a suggested format for your capacity development plan; you may also choose to submit another format so long as the above-mentioned criteria are captured. Start Date **End Date** Identify Capacity Needs | Fiscal Year Priority Capacity Development Projects Description/Objectives (YYYYMMDD) (YYYYMMDD) Contact Person **Detailed Costs** Indicators

The information provided is accurate to the best of my knowledge.			
Given Name	Family Name	Title	Date (YYYYMMDD)

