SAMPLE Arts Equity Funding Initiative Application Form (Individuals and Artist Duos)



This is a SAMPLE of the application form for Arts Nova Scotia's Arts Equity Funding Initiative program.

<u>Please do not submit this sample form with your application. Submit the online form which can be found on the program page.</u>

This form is only one of several required documents. Please refer to the "Application Checklist" document at arts-equity-funding-initiative for a list of all required documents.

* Kequired

Choose your form

September 15

The question below will guide you to the proper application form you need to fill out.

1.	Whi	ich deadline	are you a	ipplying for?	*
	\bigcirc	March 15			

2. C	Click the	option	that best	describes y	ou. *
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\bigcirc	I am an	individual	artist	applying	for	myself
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- Myself and one other artist are applying together as an artist duo
- I am applying on behalf of an organization or group of professional artists

Artist Information - Individual Artist

This application form is for individual artists. If you are applying on behalf of an organization, group, or if you and another artist are co-applicants, please click the "Back" button at the bottom of this page to select a different form.

3.	First Name *
4.	Last Name *
5.	Legal First Name (if different)
	Why do we ask for your legal name?
	Your legal name is required by the Department of Finance to pay you if you receive funding. Your legal name will not be used for any other purpose and will not be shared with the peer assessment committee.
6	Legal Last Name (if different)
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7.	Address (street number and name) *
8.	Apt #
9.	PO Box
10.	City/Town *
11.	County

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2. Pro	ovince *			
\bigcirc	АВ			
\bigcirc	ВС			
\bigcirc	МВ			
\bigcirc	NB			
\bigcirc) NL			
\bigcirc) NS			
\bigcirc) NT			
\bigcirc) NU			
\bigcirc	ON			
\bigcirc) PE			
\bigcirc) QC			
\bigcirc	SK			
\bigcirc	YT			
3. Pos	ostal Code *			

14.	Telephone (home) *				
15.	Telephone (business)				
16.	Email *				
17.	I am a Canadian citizen or permanent resident of Canada. *				
	Yes				
	○ No				
18.	Nova Scotia has been my primary residence for at least the past 12 months. *				
	Yes				
	○ No				

19.	Do you require access support? Click the link below for more information on the Access Support Supplement: https://artsns.ca/programs/access-support-supplement
	Yes
	○ No

Artist Information - Artist Duo

This application form is for two artists who are applying together. If you are applying as an individual artist or on behalf of an organization or group, please click the "Back" button at the bottom of this page to select a different form.

20.	Artist #1: First Name *			
21.	Artist #1: Last Name *			
22.	Artist #1: Legal First Name (if different)			
	Why do we ask for your legal name?			
	Your legal name is required by the Department of Finance to pay you if you receive funding. Your legal name will not be used for any other purpose and will not be shared with the peer assessment committee.			
23.	Artist #1: Legal Last Name (if different)			

24.	Artist #1: Address (street number and name) *
25.	Artist #1: Apt #
26.	Artist #1: PO Box
27.	Artist #1: City/Town *
28.	Artist #1: County

29.	Artis	st #1: Province *
	\bigcirc	AB
	\bigcirc	BC
	\bigcirc	MB
	\bigcirc	NB
	\bigcirc	NL
	\bigcirc	NS
	\bigcirc	NT
	\bigcirc	NU
	\bigcirc	ON
	\bigcirc	PE
	\bigcirc	QC
	\bigcirc	SK
	\bigcirc	YT
30.	Artis	st #1: Postal Code *

31.	Artist #1: Telephone (home) *
32.	Artist #1: Telephone (business)
33.	Artist #1: Email *
34.	Artist #1: I am a Canadian citizen or permanent resident of Canada. *
	Yes
	○ No
35.	Artist #1: Nova Scotia has been my primary residence for at least the past 12 months. *
	Yes
	○ No

36.	Artist #2: First Name *		
37.	Artist #2: Last Name *		
38.	Artist #2: Legal First Name (if different)		
	Why do we ask for your legal name?		
	Your legal name is required by the Department of Finance to pay you if you receive funding. Your legal name will not be used for any other purpose and will not be shared with the peer assessment committee.		
39.	Artist #2: Legal Last Name (if different)		
4 0	Artist #2: Address (street number and name) *		
40.	Artist "2. Address (street number and name)		
41.	Artist #2: Apt #		

42.	Artist #2: PO Box
43.	Artist #2: City/Town *
44.	Artist #2: County

45.	Arti	st #2: Province *
	\bigcirc	AB
	\bigcirc	BC
	\bigcirc	MB
	\bigcirc	NB
	\bigcirc	NL
	\bigcirc	NS
	\bigcirc	NT
	\bigcirc	NU
	\bigcirc	ON
	\bigcirc	PE
	\bigcirc	QC
	\bigcirc	SK
	\bigcirc	YT
46.	Arti	st #2: Postal Code *

47.	Artist #2: Telephone (home) *			
48.	Artist #2: Telephone (business)			
49.	Artist #2: Email *			
50.	Artist #2: I am a Canadian citizen or permanent resident of Canada. *			
	Yes			
	○ No			
51.	Artist #2: Nova Scotia has been my primary residence for at least the past 12 months. *			
	Yes			
	O No			

52.	Do either of you require access support? Click the link below for more information on the Access Support Supplement: https://artsns.ca/programs/access-support-supplement
	Yes
	○ No

Access Support Request - Individuals and Artist Duos

Access Support is a supplement to a project grant that funds individual applicants who self-identify as Deaf, having disabilities or living with mental illness, as well as groups and organizations who want to increase the accessibility to their presentation/production for audience and/or participants. This supplementary grant provides a contribution towards costs for specific services and supports required to carry out a project funded by Arts NS.

Activities Assisted and Level of Funding

Up to \$1000 for individuals and up to \$2500 for groups/organizations

Eligibility

Individuals must:

- self-identify as Deaf, having disabilities or living with mental illness
- be eligible to Arts NS programs

Groups and organizations must:

• be eligible to Arts NS programs

Eligible expenses:

A contribution towards costs associated with disability-related supports and services required to carry out your activities, including (but not limited to):

- sign language interpretation
- personal care attendant or support worker
- a transcriber or specialized editor
- personal project coordinator or assistant
- a guide or visual describer
- converting material into accessible formats
- rental of specialized equipment needed for personal access or support

Ineligible expenses include:

- major capital costs (e.g. purchase of a wheelchair, vehicle, computer, renovations, etc.)
- supports and services required for daily living (e.g. home care, regular therapy, medication etc.)
- services and supports that are not directly tied to your funded activities
- services and supports for which you are already receiving funding from another agency
- expenses incurred before your associated grant start date or after the submission of your final report

Application Requirements

Applications must be delivered with associated project grant.

Application Assessment

To receive this supplementary grant, your associated project grant must first be successful. Following this, your Access Support application will be assessed by a program officer based on:

- a reasonable budget
- how directly the support is tied to carrying out the activities in your associated project grant
- funds available

Please note, if your Access Support application is successful, you might not be awarded the full amount requested.

Notification of results

The applicant will be notified about their Access Support application in their associated project grant letter.

Conditions of Funding

If your application is successful, payment will be released with the project grant after the signed Terms and Conditions agreement is returned. A separate final report for this supplementary grant is not required; instead you must report on the Access Support funding in the final report submitted for the associated grant.

Contact

You are encouraged to speak with the Program Officer responsible for your associated grant before submitting an application

53. Detailed Description

Describe in detail the services and supports required to carry out your proposed activities.

The detailed description should include as much detail as possible and describe why the supports and/or services are required to carry out your activities. Please also include the cost of each service/support in your description. *

Please enter	the total cost	of all your	required su	pports and/o	or
services. *					

Project Information

Artistic Discipline *		
\bigcirc	Craft	
\bigcirc	Dance	
\bigcirc	Literary	
\bigcirc	Visual Arts	
\bigcirc	New Media	
\bigcirc	Media Arts	
\bigcirc	Theatre	
\bigcirc	Music	
\bigcirc	Other	

56. Grant Category

Create: \$15,000 maximum, \$500 minimum. Assists with projects that involve the creation of a new work of art in any form including cross-disciplinary or multi-disciplinary work.

Present: \$12,000 maximum, \$500 minimum. Assists with projects that involve public presentation of the artistic work(s).

Professional Development: \$12,000 maximum, \$500 minimum.

Assists with projects that involve activities intended to strengthen artistic or administrative capacity through formal study programs, mentorship, workshops, apprenticeship, conferences and other professional development activities.

Special Travel: \$1000 max. Assists with travel costs that do not fit into one of the categories above but relates to the development of artistic activity or a significant artistic opportunity. Only artists who have previously been recommended for funding by an Arts Nova Scotia peer assessment committee are eligible to apply for a Special Travel Grant. Support material is not necessary.

	\bigcirc	Create
	\bigcirc	Present
	\bigcirc	Professional Development
	\bigcirc	Special Travel
57.	Proj	ect Name *

58.	Location of Project - Where do you plan to carry out your project? Which city, province, or country? *
50	Project Start Date
JJ.	Note: Project start dates must be after the deadline. *
60.	Project End Date *
61.	Amount Requested *
62	Total Expenses *

Brief Description of Project

63.	Please provide two to three sentences briefly describing what your project is and what you plan to use the grant funds for.

Mailing List Opt-in

64.	Would you link to opt-in to the Arts Nova Scotia mailing list? We use
	this list to communicate information about our programs, deadline
	reminders, awards announcements, and other information.

Yes

O No

Mandatory Application Documents

- 65. Please note that the following application documents must also be sent, by email, to artsnssubmissions@novascotia.ca in order for your application to be complete. If mandatory components are missing from your application, it can be deemed ineligible. We cannot accept materials after the deadline:
 - -Self Identification Form
 - -Project Description
 - -Schedule of Work
 - -Artist CV
 - -Group member statements (for group applicants of three or more people)
 - -Background information about the organization (for organization applicants only)
 - -Support Material (not necessary for special travel grants)
 - -Support Material Annotations (not necessary for special travel grants)
 - -Budget
 - -Any letters of support, intent, or confirmation if necessary

See the Arts Equity Funding Initiative program page for further information about the above documents: https://artsns.ca/programs/arts-equity-funding-initiative

Please confirm your understanding of the above information. *

I understand		

Declaration

66. I declare that all the information provided is complete and true to the best of my knowledge. *

I agree

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