

## Arts Equity Funding Initiative Application Form



This is the application form for Arts Nova Scotia's Arts Equity Funding Initiative program. This form will only be used for internal purposes and will not be sent to assessors.

Please only submit this form once.

After submitting this form you will **not** receive a confirmation email. However, you are given the option to download a PDF copy of your answers. We strongly suggest that you do so.

**This form is only one of several required documents. Please refer to the "Application Checklist" document at [artsns.ca/programs/arts-equity-funding-initiative](https://artsns.ca/programs/arts-equity-funding-initiative) for a list of all required documents.**

You can view a preview of this complete form here: [https://artsns.ca/sites/default/files/2024-10/AEF\\_AppForm\\_SAMPLE.pdf](https://artsns.ca/sites/default/files/2024-10/AEF_AppForm_SAMPLE.pdf)

\* Required

### Privacy Notice

Personal information and forms provided, or all other supporting documents required for your application are collected by Arts Nova Scotia under the authority of the Nova Scotia's FOI/POP Act.

The information you provide will be used or disclosed to identify the applicant(s), the pronoun to use, and some background information about the applicant and their project, process your application for the grant application, determine your eligibility, process and approve grants, payment of approved grants to the beneficiary, contact you when required, and administer the program as required by the program's mandate.

We also collect your responses to some questions, which you voluntarily provide for program administration and understanding our applicants' diversity and accessibility requirements.

If you Opt-In for our mailing list as part of your application, we will use your email address to send you information about our programs until you unsubscribe at any time.

We may only use or disclose your personal information for another purpose if we are authorized by law to do so, or if we obtain your consent. The name of the beneficiary and the amount of grant received in any fiscal year will be published for the public.

By submitting your personal information or making any other request to us (by contacting us via any of our official channels), you acknowledge that you understand the collection, use, and disclosure of any personal information you provide to us for the purpose of your application and program administration.

To read more about how government respects your privacy when interacting with us review our full privacy statement. For questions about how your personal information is handled by the program, you may contact the responsible program officer listed on the program page.

### Choose your form

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

1. Click the option that best describes you. \*

- I am an individual artist applying for myself
- 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.

2. First Name \*

3. Last Name \*

4. 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.

5. Legal Last Name (if different)

6. Address (street number and name) \*

7. Apt #

8. PO Box

9. City/Town \*

10. County

11. Province \*

- AB
- BC
- MB
- NB
- NL
- NS
- NT
- NU
- ON
- PE
- QC
- SK
- YT

12. Postal Code \*

13. Telephone (home) \*

14. Telephone (business)

15. Email \*

16. I am a Canadian citizen or permanent resident of Canada. \*

- Yes
- No

17. Nova Scotia has been my primary residence for at least the past 12 months. \*

- Yes
- No

18. Are you an Indigenous person who is eligible for tax exemption under the Indian Act? \*

- Yes
- No
- I'm not sure

19. Is your home address on a reserve? \*

- 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. Artist #1: Province \*

- AB
- BC
- MB
- NB
- NL
- NS
- NT
- NU
- ON
- PE
- QC
- SK
- YT

30. Artist #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 #1: Are you an Indigenous person who is eligible for tax exemption under the Indian Act? \*

- Yes
- No
- I'm not sure

37. Artist #1: Is your home address on a reserve? \*

- Yes
- No

38. Artist #2: First Name \*

39. Artist #2: Last Name \*

40. 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.

41. Artist #2: Legal Last Name (if different)

42. Artist #2: Address (street number and name) \*

43. Artist #2: Apt #

44. Artist #2: PO Box

45. Artist #2: City/Town \*

46. Artist #2: County

47. Artist #2: Province \*

- AB
- BC
- MB
- NB
- NL
- NS
- NT
- NU
- ON
- PE
- QC
- SK
- YT

48. Artist #2: Postal Code \*

49. Artist #2: Telephone (home) \*

50. Artist #2: Telephone (business)

51. Artist #2: Email \*

52. Artist #2: I am a Canadian citizen or permanent resident of Canada. \*

- Yes
- No

53. Artist #2: Nova Scotia has been my primary residence for at least the past 12 months. \*

Yes

No

54. Artist #2: Are you an Indigenous person who is eligible for tax exemption under the Indian Act? \*

Yes

No

I'm not sure

55. Artist #2: Is your home address on a reserve? \*

Yes

No

## On-Reserve and Off-Reserve Amounts

56. How much of your project will take place on a reserve (even if it's not your home reserve)? \*

- All of it
- Some will be on-reserve, some will be off-reserve
- None of it

57. How much of the grant money will pay for on-reserve work? This amount will be tax-exempt under the Indian Act. If you have included a "living expenses" amount on your budget, you can include that here as well.

Not sure about this amount? Contact program officer David Goudie for assistance at [david.goudie@novascotia.ca](mailto:david.goudie@novascotia.ca) or (902) 497-8538 \*

58. How much of the grant money will pay for off-reserve work? This amount will be taxable.

Not sure about this amount? Contact program officer David Goudie for assistance at [david.goudie@novascotia.ca](mailto:david.goudie@novascotia.ca) or (902) 497-8538 \*

### Applicant Information - Organization or Group

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

59. Name of Organization / Group \*

60. Address (street number and name) \*

61. Suite #

62. PO Box

63. City/Town \*

64. County

65. Province \*

AB

BC

MB

NB

NL

NS

NT

NU

ON

PE

QC

SK

YT

66. Postal Code \*

67. Email \*

68. Website

69. Facebook

70. Twitter

71. Other Social Media Accounts

72. Is your organization registered with the Nova Scotia Registry of Joint Stocks as a non-profit society or non-profit cooperative? \*

Yes

No

73. What is your Registry of Joint Stocks Registration Number? \*

74. Are you a group of three or more professional artists (majority living in Nova Scotia) who are creating a new work together? \*

Yes

No

75. Does your organization receive operating assistance from Arts Nova Scotia or the Department of Communities, Culture, Tourism and Heritage? \*

Yes

No

76. How much do you receive annually?

77. Contact Name \*

78. Contact Phone - Primary \*

79. Contact Phone - Secondary \*

80. Contact Email \*

81. Name of Chairperson or Organization Owner

82. Chair or Owner Phone - Primary

83. Chair or Owner Phone - Secondary

84. Chair or Owner Email

85. 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

### Need Access Support?

86. 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

### Eligibility Notice

One of the responses you've entered indicates that you are not eligible for this program. If this was a mistake, click "Back" to change your answer. Otherwise, you can contact a program officer to clarify the eligibility requirements.

Are you sure you have the correct form?

The answers you've entered indicate that you may have selected the wrong application form. Click "Back" until you reach the first page where you "Choose Your Form".

## 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

## 87. 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. \*

88. Total Request

Please enter the total cost of all your required supports and/or services. \*

## Access Support Request - Organizations and Groups

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.

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#### Groups and organizations must:

- be eligible to Arts NS programs

#### Eligible expenses:

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### Contact

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

## 89. Rationale

In the space below, describe the rationale for the services and supports requested to carry out your proposed activities.

90. 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. \*

91. Total Request

Please enter the total cost of all your required supports and/or services. \*

### Generative AI Use

Applicants may choose to use generative AI to help write their grant application. We understand that the grant writing process relies heavily on written communication and that generative AI may ease that burden. We also acknowledge that artists may choose to use generative AI as a tool of creation.

Please note that the purpose of the following questions is for transparency and data collection. Your use of AI will not affect the assessment of your application.

92. Did you use generative AI to draft your application? \*

Yes

No

93. Will generative AI be used in the creation of artistic outputs in your project?

Note that applicants should be open and transparent in the Project Description about the use of AI in any creation project. \*

Yes

No

## Project Information

## 94. Artistic Discipline

**Note:** The definition of Media Arts within Arts Nova Scotia's programming has changed. See our Glossary of Terms page for details: <https://artsns.ca/glossary-terms#media-arts> \*

- Craft
- Dance
- Literary
- Visual Arts
- Media Arts
- Theatre
- Music
- Other

## 95. 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.

\*

- Create
- Present
- Professional Development

## 96. Project Name \*

## 97. Location of Project - Where do you plan to carry out your project? Which city, province, or country? \*

## 98. Project Start Date \*

**Note:** Project start dates must be after the deadline.

## 99. Project End Date \*

100. Amount Requested \*

101. Total Expenses \*

Brief Description of Project

102. 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

103. Would you like 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

No

## Mandatory Application Documents

104. Please note that the following application documents must also be sent, by email, to [artsnssubmissions@novascotia.ca](mailto: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

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

I agree

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