

# SAMPLE

**Application ID:** -

**Application Type:** Professional Development

**Organization:** Individual

**Primary Contact:**

An asterisk (\*) indicates the field is mandatory

## Profile Details

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To access profile information: click 'Home' (top right). From your home page click 'Organization Profile' (building icon) or 'Personal Profile' (crowd icon).

**Name:**

**City:**

**Province:**

**Pronouns:**

**If your profile information is not current, go to your profile and update it before completing the application.**

## Applicant Details

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**What is the applicant's PRIMARY field of practice?**

Please Select

**If other, describe:**

**What is the applicant's PRIMARY ROLE within their field of practice?**

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Please Select

**If other, describe:**

**Resident of B.C. since**

YYYY-MM-DD

**How many years (#) have you been engaged professionally in your PRIMARY practice (paid work)?**

Note: This information is collected to identify underserved demographics for future programs and intakes. Years of professional practice is not a consideration in the assessment beyond basic eligibility (two years minimum). Field will only accept numbers.

##

**Provide a brief history of your artistic practice.**

Include highlights of education and/or training, employment, achievements, etc. Use point form.

(100 words maximum)

**Have you received a Project Assistance or Individual Arts award from the BC Arts Council before?**

Please Select

**Have you received a grant and completed any outstanding final reports through First People's Cultural Council's Indigenous Arts Program?**

Please Select

## Project Information

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**Which type of activity are you requesting support for (check any that apply):**

Please Select

**If other, describe:**

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**Amount Requested**

\$0

**Project Start Date**

YYYY-MM-DD

**Project End Date**

YYYY-MM-DD

**Describe your project briefly by completing this sentence: Funding is requested to assist with...**

25 words total

**Have you confirmed your participation in this activity with the organization, teacher, master, advisor, or mentor, as applicable?**

Y/N

**If unconfirmed, what is the status of registration, application, or arrangements?**

**What are your learning goals?**

100 words total

**What is the proposed learning activity?**

Include: Name and description of course or workshop and instructor; name of mentor and focus of mentorship; name of host organization and focus of residency.

200 words total

**Include a website or link if available:**

**Why have you selected this specific course/workshop, mentor, and/or host organization?**

100 words total

**How will the activity impact you, your professional practice, and your future opportunities?**

200 words total

**Why is this activity important for you at this time?**

100 words total

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**What is the workplan, timeline, or schedule? Include milestones and/or benchmarks.**

100 words total

**If your project involves working with individuals or materials from communities outside your own, particularly those that have been historically underserved, describe the steps taken to collaborate with these communities, respect protocols and integrate an equitable and ethical approach in your work.**

250 words total

**Does your application include travel?**

Please Select

**Will artists, arts and cultural practitioners, and technicians involved with this project be paid in alignment with industry standards within the field of practice (e.g., CARFAC)?**

Please Select

**If no, explain how fair (200 words maximum)  
compensation was  
determined within the  
project and/or  
community context:**

**Will Elders and/or Traditional Knowledge Keepers involved with this project be compensated fairly according to community context?**

Please Select

**Explain how the (200 words maximum)  
compensation level was  
determined:**

## Alignment with Strategic Priorities

**Optional: Funding priority may be given to applicants and/or activities connected to or aligned with the BC Arts Council Strategic Priorities. Select any of the following that apply to you or your application:**

- Indigenous (First Nations, Métis, and/or Inuit) communities.
- Underserved communities, including Deaf, Disability and Mad arts
- Racialized and/or people of colour
- 2SLGBTQIA+.
- Regional areas in B.C. (communities outside of greater Vancouver and the capital region, not including Sooke, Metchosin, the Gulf Islands, or the Juan de Fuca electoral area).
- Does not apply.

**Provide a brief context to the connections selected above.**

(250 words maximum)



All applicants must complete this expense summary.

Maximum request is \$7,500. Only include expenses for which you are requesting support.

It is not necessary to complete each line. You can leave an expense field blank as appropriate.

Provide notes for each included expense.

Dollar values should be entered in numeric format only—no special characters, e.g. \$, £, etc.

## Budget

### Expenses

	Project Forecast	Notes
Subsistence (maximum \$500 per week)	\$0	add notes
Travel and related expenses (e.g. accommodation, meals)	\$0	
Supplies (e.g. consumable supplies, equipment rental, reference material, etc.)	\$0	
Fees (e.g. for mentors/instructors/advisors or tuition/registration)	\$0	
<b>TOTAL EXPENSES</b> This total must match the total request on the Project Information tab	\$0	

## Support Material

**A curriculum vitae (CV) or resume that includes professional training and related paid professional activities / work experience (maximum 3 pages, 1 file).**

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**As applicable: written confirmation from the institution or teacher, or your advisor or mentor (maximum 1 file).**

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**As applicable: A resume or short bio for individual advisors or mentors participating in the project outside of a formal organization or institutional offering (maximum 3 files).**

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## Feedback

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We are always looking for ways to improve how we communicate with the arts and culture sector in B.C. This section is optional, and is not part of the application process, but your answers will help us improve the services we provide.

**How did you learn about the intake for this program?**

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Please Select

**If applicable, the agency  
(see question above):**

**In the future, how would you like to be informed about our programs?**

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Please Select

**Is this your first application to BCAC?**

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Please Select

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**Have you ever received BCAC funding?**

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Please Select

**How long did this application take you to complete (hours)?**

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## Declaration

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### Declaration and Consent

In submitting this application, I declare that, to the best of my knowledge and belief:

- I/we meet all of the eligibility criteria for this program;
- the information provided in this application is complete and true in every respect;
- I/we abide by all applicable laws;
- I am/we are committed to providing safe and respectful working conditions and to fostering a workplace free from discrimination, harassment and sexual misconduct; and
- any personal information submitted with this application has been submitted with the authorization of the individual(s) concerned and such individual(s), and I, consent (effective as of the date of submission of this application) to the disclosure of this personal information outside of Canada, including by way of the Internet, for public reporting and promotional purposes relating to this program.

### Personal Information

The personal information on this application is collected in accordance with Section 26(c) and (e) of the Freedom of Information and Protection of Privacy Act and will be used for the following purposes: determining suitability for and awarding of funding, tracking and distributing funding, program development and evaluation, and communication and outreach.

Personal information collected through the application process may be disclosed to external peer assessors in order to adjudicate this application. If successful, an individual recipient's Social Insurance Number may be disclosed to the Canada Revenue Agency through the issuance of T4As.

In addition, the applicant's name, location, funded activity and award amount may be made publicly available, including worldwide by way of the Internet, should funding be awarded.

If you have questions about the collection, use or disclosure of personal information, please contact:

Director, BC Arts Council Programs  
800 Johnson Street, Victoria, BC, V8W 9W3  
Phone: (778) 698-3533

## Acknowledgement

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I understand and agree to the terms and conditions stated above.

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