

# BC Arts Council Scholarship Application Preview

Updated March 5, 2024

## Overview

This is a sample of the BC Arts Council Scholarship Application.

This sample will be updated if the application is updated or changed in any way, with changes highlighted in yellow and marked as “new.” Check back to make sure you have the most current version.

Applications must be completed in the online system, which requires you to set up a profile in advance.

As a sample of the application, this does not contain all application content scenarios.

Applications submitted in a Word document via email will not be accepted.

### If you are D/deaf or have a disability and require support to access the online system or make your application - contact the BC Arts Council Accessibility Coordinator to discuss:

* Nicola Dunne – 778-405-4007 – Nicola.Dunne@gov.bc.ca

### For scholarship program specific questions, please contact the Program Advisor:

* Anissa Paulsen – 236-478-2560 – Anissa.Paulsen@gov.bc.ca

## Profile Details

An asterisk (\*) indicates the field is mandatory.

**Registration Profile Summary**

(System Generated Content)

Name:

Municipality:

Province:

Pronouns:

**If the Profile Summary above is not correct:** go to your Personal Profile and update it before completing the application.

**To access your Personal Profile:** click ‘Home’ (top right). From your home page click ‘Personal Profile’ (crowd icon).

Changes to address information must be submitted by email to: BCArtsCouncil@gov.bc.ca.

Mandatory check box: I have reviewed my Personal Profile and made all updates.

### Designated Priority Groups

The BC Arts Council administers supports for [designated priority groups](https://www.bcartscouncil.ca/priorities/priority-groups/)

The BC Arts Councils designated priority groups include applicants and arts and cultural practitioners who are:

• Indigenous (First Nations, Métis, and/or Inuit) Peoples;

• D/deaf or experience disability;

• Black or people of colour;

• Located in regional areas (outside greater Vancouver or the capital region).

Complete the Designated Priority Groups Information section and Equity Data Tool in the Profile prior to submitting the application.

Once you have completed this section, the information will remain in your Personal Profile. You will not need to provide the information again unless there are changes.

All applicants are also encouraged to complete the Voluntary Self-ID information for statistical and research purposes.

**New:** Updated information is requested from all applicants. On your profile, click the Designated Priority Groups tab and look for the headline labelled ‘New' to submit this additional information.

#### Check Box:

I have reviewed the new Designated Priority Groups and Equity Data Tool tabs on the Personal Profile.

## Applicant Details

An Asterix (\*) indicates the field is mandatory.

### \*Residency

Please select:

* I am a Canadian citizen.
* I am a Permanent Resident.

### \*British Columbia Resident Acknowledgement

For information on B.C. Residency requirements, please see [www.bcartscouncil.ca/determining-b-c-residency](http://www.bcartscouncil.ca/determining-b-c-residency)

(check one box only:

* I am a Resident of B.C. and I have lived in B.C. for at least one year immediately prior to this application.
* I am a student studying outside of B.C., and a dependent of my parent(s), step-parent(s), sponsor, or legal guardian, who have lived in B.C. for at least one year prior to this application.
* I am an independent student studying outside of B.C. and, immediately prior to beginning my studies abroad, last lived in B.C. for 12 continuous months.

### \*What proof of B.C. residency are you able to provide (if requested)? Check all that apply:

* I have a current B.C. Personal Health Number.
* I have a current BC services card or BC driver's license.
* I have a student loan from B.C.
* I filed taxes for last calendar year as a B.C. resident.

### \*Resident of B.C. since

(Year-month-day)

### \*I will be at least 15 years old as of December 31, 2024.

Please select:

* Yes
* No

## Program of Study

An Asterix (\*) indicates the field is mandatory.

Complete this section with information about the program you will be attending (with terms this Summer, Fall or next Spring).

### \*I plan to be enrolled in the following terms:

Check all that apply:

* Summer (this calendar year)
* Fall (this calendar year)
* Winter/Spring (next calendar year)

### \*Scholarship amount requested:

Please select:

* $3,000 - for ONLY one term of full-time study
* $6,000 – two (or more) terms of full-time study

### \*What level of study will you be enrolled in between Summer this year and Spring next year?

Please select:

* Dance High School program
* Degree/Diploma/Certificate 1st year
* Degree/Diploma/Certificate 2nd year
* Degree/Diploma/Certificate 3rd year
* Degree/Diploma/Certificate 4th year
* Post-university diploma/degree/certificate
* Masters 1st year
* Masters 2nd year+ (second year or greater)
* PhD/DMA 1st year
* PhD/DMA 2nd year+ (second year or greater)

## Program of Study

An Asterix (\*) indicates the field is mandatory.

Complete this section with information about the program you will be attending (with terms this Summer, Fall or next Spring).

### \*Name of University/ College / School: (100 characters total)

### \*City of University/ College / School: (20 characters total)

### \*Province/State of University/ College / School: (40 characters total)

### \*Country of University/ College / School: (40 characters total)

### \*Website of Program / Department: (insert weblink)

### \*Name of Degree/Diploma and MAJOR (example: Bachelor of Fine Arts, Major in Visual Arts): (80 characters total)

### \*Length of degree or diploma (List start date and anticipated end date. For example: September 2020 – April 2024): (50 characters total)

### \*I have been accepted into this program of study.

Please select:

* Yes
* No, not yet.

Check Box: If no, I agree to update the BC Arts Council Scholarship Program Advisor via email when I receive confirmation of my acceptance.

## Area of Assessment by Program of Study

An Asterix (\*) indicates the field is mandatory.

Select one of the fields that best describes your program of study. This category will determine the assessment panel that will review your application.

### \*Assessment Area:

(Select only one area)

* Arts administration and Cultural management
* D/deaf, Disability, Mad Arts
* Museum Studies: Collections Management
* Museum Studies: Conservation
* Museum Studies: Curatorial Practices
* Museum Studies: Museum Education
* Museum Studies: General
* Critical and Curatorial Practice
* Community-based Arts Practice
* Socially-engaged Art Practice
* Craft-based artistic practices: Book arts
* Craft-based artistic practices: Ceramics
* Craft-based artistic practices: Woodworking
* Craft-based artistic practices: Glass
* Craft-based artistic practices: Jewelry, Beadwork
* Craft-based artistic practices: Metal Arts
* Craft-based artistic practices: Textile or fibre arts
* Dance: Choreography
* Dance: Classical Ballet performance
* Dance: Contemporary Ballet performance
* Dance: Contemporary / Modern
* Dance: Traditional, Flamenco, Other
* Indigenous Fine Arts: carving
* Indigenous Fine Arts: drawing or painting
* Indigenous Fine Arts: jewellery or beadwork
* Indigenous Fine Arts: Textile or fibre arts, weaving, wearable art
* Literary / Creative Writing: Children / youth literature
* Literary / Creative Writing: Fiction
* Literary / Creative Writing: Graphic Novel
* Literary / Creative Writing: Nonfiction
* Literary / Creative Writing: Poetry
* Literary / Creative Writing: Playwriting
* Literary / Creative Writing: Publishing
* Media Arts: 3-D Animation
* Media Arts: Audio / Sound Art
* Media Arts: Film
* Media Arts: New Media
* Media Arts: Video
* Music: Composition
* Music: Conducting
* Music: Music Production
* Music: Jazz / contemporary (various instruments)
* Music: Brass
* Music: Keyboards
* Music: Percussion
* Music: Strings
* Music: Winds
* Music: Voice
* Spoken Word / Storytelling
* Theatre: Acting/performance
* Theatre: Directing
* Theatre: Musical Theatre
* Theatre: Technical /Design / Production
* Theatre: Circus Arts
* Theatre: Devising
* Theatre: Applied theatre
* Theatre: Comedy
* Visual Arts: 2-D Animation
* Visual Arts: Drawing & Painting
* Visual Arts: Installation
* Visual Arts: Mixed Media / Multimedia
* Visual Arts: Performance Art
* Visual Arts: Photography
* Visual Arts: Printmaking
* Visual Arts: Sculpture
* Multi-disciplinary Arts

### For music students, specify your primary instrument or vocal range:

Please select:

* French Horn
* Tuba
* Trumpet
* Trombone
* Piano
* Collaborative Piano
* Organ
* Drum
* Timpani
* Vibraphone
* Marimba
* Violin
* Viola
* Cello
* Bass (double bass)
* Harp
* Guitar
* Flute
* Oboe
* Clarinet
* Bassoon
* Saxophone
* (voice) Soprano
* (voice) Mezzo Soprano
* (voice) Contralto
* (voice) Tenor
* (voice) Baritone
* (voice) Bass;
* (voice) Countertenor;
* Other

#### For music students who select ‘other’ above, specify:

(insert text)

### If you selected Multi-disciplinary Arts, confirm the main artistic discipline under which your application should be assessed.

(25 characters maximum)

## Educational History

An Asterix (\*) indicates the field is mandatory.

### \*Are you currently attending school?

Please select:

* Yes
* No

#### If yes,

#### Name Of School Currently Attending (100 characters maximum)

Current Level/Year (40 characters maximum)

Program/Major (100 characters maximum)

## Résumé/CV (curriculum vitae)

### Upload a PDF of your résumé/CV, no more than 2 pages.

Your résumé / CV is a way the assessment panel will understand your commitment and dedication to your artistic practice.

Include your educational and training history and all relevant exhibitions, examinations, performances, productions, publications, awards, recognition, paid or volunteer experiences and other involvement in your community.

For relevant experiences, include:

• Date

• Activity / Event / Position

• Short description of your role in the activity

• Location of activity (City)

For Educational History, begin with most recent or current school and include:

• School Name

• City

• Program

• Date(s) Attended

• Degree, Diploma, Certificate Achieved (or in progress)

For other training or specialized courses or mentorships, include:

• Instructor / Mentor / Course

• City

• Area of Specialization

• Length of Course / Dates Attended

• Degree, Grade, Level Achieved (or in progress)

If listing an award or significant recognition recently received and related to your artistic practice, include:

• Date

• Award / Recognition

• Presented by

• Short Description

If recent and relevant, Performing Arts Repertoire may be included for performing arts applicants (dance, theatre, music). Please list:

1. Roles prepared/choreographed/composed (acting / dance applicants);

2. Solo, chamber and/or significant orchestral works performed or prepared (music applicants);

3. Works directed and other related theatrical experience (theatre directing applicants);

4. Work experience for theatrical productions and course projects (technical and design applicants).

Include:

• Role / Song / Works Prepared

• Date

• Short Description

(Drag and drop files into box)

Maximum file size: 2 GB. Maximum number of files: 1. Allowed file types: PDF

## Artist Statement

An Asterix (\*) indicates the field is mandatory.

Your Artist Statement is one way for the assessment panel to get to know you and your art. Please answer honestly and to the best of your ability. You have two options for submitting the statement as outlined below.

Consider the following assessment criteria when completing this section.

Artistic Work (50%):

The assessment panel will consider:

* Your artistic samples and how they demonstrate your ability, progress and potential as related to your current level of training and individual context.
* Strength of your artistic statement and its connection with your artistic samples.
* Level of commitment and dedication to your artistic practice. This may be as demonstrated through past performances, exhibitions, achievements, recognition, or your involvement in an artistic or other community.

### \*Artist Statement: Describe the art you create, how and why you create it. Talk about your creative process in connection to the artistic samples you are submitting. Please answer in first-person.

(400 words maximum)

**You have two options for submitting your Artist Statement. Select only one.**

* Option 1: Use the text box above for a written Artist Statement.
* Option 2: Upload a verbal or sign language Artist Statement.

As part of our commitment to accessibility, the BC Arts Council is now accepting parts of applications in audio formats.

* If you choose to submit a verbal Artist Statement, you may upload your audio file below and write 'verbal option' in the box above.
* ASL or Sign Language Submissions may be uploaded as video content– please ensure you have captioned or translated the Sign Language into spoken or written English. For support doing this, please enquire about [Application Assistance](https://www.bcartscouncil.ca/program/application-assistance/).
* Your verbal /signed answer must be no longer than 5 minutes total.
* Your submission must only record your verbal answer to the Artist Statement question.
* Do not add any additional sound, design or production features.

(Drag and drop files into box)

Maximum file size: 50 MB

Allowed File Types MP3,  FLAC,  WMA,  WAV,  RA,  RM,  MID,  MIDI,  OGG,  MP4,  MOV,  FLV,  OGV,  WEBM,  WMV,  MKV,  AVI,  RM,  ASF,  RMVB,  MPG,  MPEG,  MPG,  MP2,  M4V

## Impact

An Asterix (\*) indicates the field is mandatory.

The questions below are a way for the assessment panel to get to know you. Please answer honestly and to the best of your ability.

Consider the following assessment criteria when completing this section.

Impact (50%):

The assessment panel will consider:

* Urgency, potential and relevance of your program of study to impact the development of your independent artistic practice and future goals.
* Degree of impact you or your art may have on your field of practice or identified communities.
* Degree of impact this scholarship may have on your artistic development.
* Integrity of your practices including approaches to research, collaborative processes, contributors, source materials, and cultural contexts and protocols (as applicable).

### \* Why did you choose this particular program of study? How will this program help you develop your artistic practice or achieve your short- or long-term goals. (100 words maximum)

### \* How do you think your artistry will contribute to your community and/or your field of practice? This could mean any or all of your artistic, cultural, geographic, or other communities.

(100 words maximum)

#### \*Is your work influenced by, or does it involve or reflect cultures or communities outside of your own?

Please select:

* yes
* no

#### If yes: Describe steps taken to respectfully reflect and collaborate with these communities and integrate an equitable and ethical approach in your work.

(150 words maximum)

## Artistic Samples

Review the [*Guidelines and Appendix: Requirements for Artistic Samples*](https://www.bcartscouncil.ca/program/scholarship/)to understand the type and number of artistic samples that are required for your field of practice. Keep in mind your artistic samples should reflect your strongest work and best demonstrate your abilities, artistic progress, and potential.

### Artistic Samples

You may provide uploads or links to external sites (such as Vimeo or Youtube). Include any passwords to external sites in the inventory. Do not use Google Docs or Dropbox links.

* Excess materials will not be reviewed.
* Check all samples (links and/or uploads) to ensure they are working properly prior to submitting your application.

Button: Click here to enter the inventory of submitted files

(Pop out form)

In pop out window:

Complete the form below to provide details for the artistic samples you are submitting with this application.

#### Inventory For Audio and Video Submissions

* **Item Number** (insert text)
* **Title/Name of Recording** (insert text)
* **Performance/Creation Date** (Year-Month-day)
* **Brief Description of Work (include choreographer, composer, venue). Identify yourself in partner or group work.** (insert text)
* **Timecode(s) to watch** (insert text)
* **URL (if not uploading file within application)** (insert text)
* **URL password, if applicable (please set password to BCAC\_2023)** (insert text)
* **Your role(s) / credit(s)** **(as applicable)** (insert text)

Click on the “+” button to enter additional lines

#### Inventory For Text and Image Submission

* **Item Number (or page # within PDF)** (insert text)
* **Title/Name of Piece** (insert text)
* **Creation/Publication Date** (insert text)
* **Brief Description of Work (25 words maximum)** (insert text)
* **Dimensions and Materials (as applicable)** (insert text)
* **Your role(s) / credit(s) (if collaborative work)** (insert text)
* **Captions (for photography work)** (insert text)

Click on the “+” button to enter additional lines

Button: Save

#### [Checkbox] I have completed the inventory of my artistic samples using the form above.

### Media Library

Portfolio Materials - Upload media files here

* Use the following naming convention for the file name of each submitted digital file: Surname, Given Name, File Order Number, Title of Work (.jpg, .mp3, etc.)
* Ensure the file extension is included in the file name
* The order number will ensure the works are presented chronologically. Ensure the first nine (9) file order numbers begin with a zero so that they follow your image list.
* Do not include any special characters or symbols or quotation marks (e.g. #?\_”&|…) in the file name.
* File Naming Example: SmithSara01Painting.jpg

Summary of recommended maximums per file and format:

* Video: 500 MB; mp4, mov, and avi formats
* Audio: 100 MB; mp3, wav, and aif/aiff formats
* Image: 10 MB; jpg/jpeg, gif, png, and bmp formats

Videos may take a few minutes before they become accessible while they are copied to a media server. The preview thumbnail will appear as 3 dots until this is completed. If you are having difficulty with your upload, call (250) 356-1718 or [BCArtsCouncil@gov.bc.ca](file:///%5C%5Csfp.idir.bcgov%5Cs173%5CS7305%5CBCAC%5C%40ops%5C80000%20-%20PROGRAM%20GUIDELINES%5C25%20-%20GUIDELINE%20DEVELOPMENT%5CFY2024-25%5CFY2024-25%20Scholarship%5CBCArtsCouncil%40gov.bc.ca) during business hours for assistance.

(Drag and drop files into box)

Maximum file size: 500 MB. Maximum number of files: 10

### Text Library

Portfolio Materials - Upload PDF files here

* Use the following naming convention for the file name of each submitted digital file: Surname, Given Name, File Order Number, Title of Work to upload your .pdf
* Ensure the file extension is included in the file name
* The order number will ensure the works are presented chronologically. Ensure the first nine (9) file order numbers begin with a zero so that they follow your image list.
* Do not include any special characters or symbols or quotation marks (e.g. #?\_”&|…) in the file name.
* File Naming Example: SmithSara01PaintingEssay.pdf

Summary of recommended maximums per file and format:

* Written: .pdf format

(Drag and dop files into box)

Maximum file size: 500 MB. Maximum number of files: 10

## Feedback

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?

Please Select:

* BC Arts Council Website
* BC Arts Council social media
* Direct email from BC Arts Council
* Workshop or Presentation featuring BC Arts Council Staff
* BC Arts Council Program Officer
* Another agency, including newsletter or social media
* Word of mouth, including past applicants
* Traditional media including newspapers or radio

If applicable, the agency (see question above): (insert text)

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

Please Select:

* Direct Email, featuring a summary of upcoming arts council programs
* BC Arts Council social media
* BC Arts Council website
* Through communications from other agencies (for example, through professional associations, arts service organizations or collectives)

### Is this your first application to BCAC?

Please Select

* Yes
* No

### Did you attend an Information Session prior to completing your application?

Please select

* Yes
* No

### Have you ever received BCAC funding?

Please select

* Yes
* No
* I don’t know.

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

(enter numeric value)

### In the future, can we contact you to participate in a short survey of how this Scholarship may have impacted your artistic practice?

Please select

* Yes
* No

## Declaration

### Declaration and Consent

The applicant/student for this scholarship must complete this section.

If under 19 years, the applicant must also have their parent/guardian check the box below.

* In submitting this application, I declare that, to the best of my knowledge and belief:
* I meet all of the eligibility criteria for this program; and
* the information provided in this application is complete and true in every respect;
* and I consent (effective as of the date of submission of this application) to the disclosure outside of Canada, including by way of the Internet, of my personal information submitted with this application 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, your Social Insurance Number may be disclosed to 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

800 Johnson Street, Victoria, B.C., V8W 9W3 Phone: (250) 356-1718

## \*Acknowledgement

Check Box:

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

### \*Age declaration:

Select One

* I am 19 years of age or older
* I am under 19 years of age: Parent or Guardian to complete following section

#### \*If under 19:

Check box:

* I, [Parent or guardian of applicant under 19 years of age] declare that I have reviewed the applicant’s declaration and I hereby consent to the applicant applying to the BC Arts Council for a scholarship.

\*Name of Parent/Guardian: (Insert Text)