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Celebrations & Events Program

Arts & Culture Grants

**Community Events**

Application Form

Grants up to $7,500

Celebrations & Events Grants for ‘*Community Events’* seek to support the development of new events and to encourage the growth and development of existing events that foster community connection and that contribute to residents’ sense of belonging, identity and place. Grants are available to events:

* *that foster connection through shared community congregation and experiences*
* *that evoke a sense of celebration*
* *that provide an expression of the diversity and uniqueness of our community*
* *that meet a clear community need and/or target underserved sections of the population, and*
* *that offer opportunities for local creative talent*

Priority will be granted to events that create safe, welcoming, accessible and inclusive spaces that encourage the attendance and/or participation of diverse and otherwise underserved populations.

Grants Deadlines

EARLY INTAKE: Grant Applications will be accepted from Monday September 23rd, 2019 to *Tuesday October 15th, 2019 at 4:30 pm*

 *(for activities that take place from January 1st through August 10th, 2020)*

LATE INTAKE: Grant Applications will be accepted from Monday February 10th, 2020 to *Tuesday March 3rd, 2020 at 4:30 pm*

 *(for activities that take place from July 15th through December 31st, 2020)*

A P P L I C A N T I N F O R M A T I O N

1. Applicant Organization

NAME OF ORGANIZATION

MAILING ADDRESS

CITY PROVINCE POSTAL CODE

 BC

2. Primary Contact *(person completing application)*

NAME TITLE WITH ORGANIZATION

E-MAIL PHONE (1) PHONE (2)

 ( ) ( )

3. Eligibility Check

*Eligible applicant categories are listed below:*

PLEASE CHECK ANY OR ALL THAT APPLY

|  |  |
| --- | --- |
| ⬜ | a non-profit organization, registered under the BC Society Act |
| ⬜ | a recognized charity, granted charitable status by the Canada Revenue Agency |
| ⬜ | a community service organization |
| ⬜ | an organization providing services to a specific ethnic or cultural group |
| ⬜ | a local community association |
| ⬜ | a business association or BIA |
| ⬜ | another recognized community groupPLEASE SPECIFY |

4. Society Standing

*If you self-identified above as a registered non-profit society or charitable organization, please complete the following:*

**OFFICIAL SOCIETY OR CHARITY NAME, IF DIFFERENT FROM THE NAME PROVIDED ABOVE**

4. Society Standing *(continued)*

**BC society number and/or charity number**

is your organization currently in good standing? YES NO

 ⭘ ⭘

IF YES, PLEASE provide PROOF OF GOOD STANDING ATTACHED

 ⭘

P R O G R A M M I N G M E R I T and I M P A C T

Policy identifies two areas of evaluation that speak to *‘programming merit and impact’*:

* *Program Mix (i.e. interesting and engaging mix of activities)*
* *Value of Intended Outcomes*

5. Event Summary

NAME OF THE EVENT

DATE(S) OF THE EVENT

EVENT LOCATION(S)

*Please provide a brief outline of the programming and planned activities at the event.*

(200-250 WORDS)

5. Event Summary *(continued)*

6. Program Objectives & Outcomes

*Please outline your goals and objectives in putting on the event. How does the program of activities, as described above, help you to further these goals? What, if anything, do you need to adjust or do differently to achieve the desired outcomes?*

(200 WORDS)

7. Support Materials – Program Impact

*Please attach the following support materials:*

REQUIRED ATTACHMENTS:

|  |  |
| --- | --- |
| ⬜ | a selected list of the artists, entertainers, performers and other creative talent *expected* to be part of the event* NUMBER OF DIFFERENT ARTISTS, ENTERTAINERS OR PERFORMANCE ACTS INVOLVED
* PROVIDE A BRIEF DESCRIPTION FOR EACH ARTIST
* HIGHLIGHT ANY THAT ARE CONFIRMED
* INCLUDE IN ELECTRONIC SUBMISSION
 |
| ⬜ | photos\* from previous year’s activities* MINIMUM OF 10, MAXIMUM OF 15
* SUBMIT AS PRINT QUALITY .JPG FILES – NO .PDF PAGES OR SLIDESHOWS
* INCLUDE IN ELECTRONIC SUBMISSION – NO PRINTED COPIES
 |

*\* PHOTOS*

*NVRC reserves the right to use any photos submitted for reporting and non-commercial promotional purposes – i.e. in staff reports and presentations, on the website or as part of materials that promote the programs and work of the NVRC.*

*Please secure any necessary releases or permissions prior to submitting photos as part of this application.*

PROVIDE IF AVAILABLE:

|  |  |
| --- | --- |
| ⬜ | any collateral materials used in previous year(s)* PROGRAMS – INFORMATIONAL MATERIALS
 |
| ⬜ | video and/or audio files* SUBMIT A LIST OF ACTIVE LINKS TO YOUTUBE, VIMEO OR OTHER WEB VIDEO SITES
 |
| ⬜ | copies of testimonials or letters of support |

C O M M U N I T Y B E N E F I T & I M P A C T

Policy identifies four sets of criteria that speak to *‘community benefit and impact’*:

* *Demonstrated Need*
* *Level of Service*
* *Public Accessibility*
* *Level of Volunteer Involvement*

8. Attendance and Participation

EVENT VENUE(S) MAXIMUM VENUE CAPACITY (AT ANY ONE TIME)

1.

2.

3.

ATTENDANCE TARGET TOTAL HOURS OF PROGRAMMING

PREVIOUS YEARS’ ATTENDANCE TOTAL HOURS OF PROGRAMMING IN PREVIOUS YEARS

20\_\_: 20\_\_:

20\_\_: 20\_\_:

20\_\_: 20\_\_:

9. Promotion, Outreach & Audience Development

*Describe your activites to promote the event. Identify your target audience, and outline your plan to reach that audience.*

**(200 words)**

9. Promotion, Outreach & Audience Development *(continued)*

*Describe any outreach activities you undertake to attract community support or to reach and build (new) audiences for the event.*

**(150 words)**

10. Social Media

*Please identify the various social media platforms you use:*

**facebook:** **twitter:**

[www.facebook.com/](http://www.facebook.com/) @

**event hashtag: instagram:**

# @

**SNAPCHAT: YOU TUBE CHANNEL:**

*How do you use social media to access your target audiences. What are your social media targets in terms of hits, likes, and views.*

**(150 words)**

11. Access and Inclusion

*Are you taking steps to ensure that your program is accessible, inclusive and/or welcoming with respect to:*

adults &/or children WITH PHYSICAL DISABILITIES? YES NO

 ⭘ ⭘

ADULTS &/OR CHILDREN WITH DEVELOPMENTAL DISABILITIES? YES NO

 ⭘ ⭘

MEMBERS OF THE LGBTQ2+ COMMUNITY? YES NO

 ⭘ ⭘

(LOCAL) FIRST NATIONS &/OR URBAN INDIGINOUS PEOPLE? YES NO

 ⭘ ⭘

PEOPLE FROM ETHNIC AND CULTURAL MINORITIES? YES NO

 ⭘ ⭘

LOW-INCOME PEOPLE & FAMILIES? YES NO

 ⭘ ⭘

OTHER UNDERSERVED POPULATIONS IN THE COMMUNITY? YES NO

 ⭘ ⭘

**PLEASE SPECIFY**

*Describe* ***specific steps*** *you are taking with the identified population(s) above to identify and remove barriers impacting their participation.*

11. Access and Inclusion *(continued)*

12. Community Support

*Please speak to any indicators of the community’s support for the event or activity. Please list and describe any partnerships involved in the creation, delivery and support of the event. What does the community’s support make possible?*

**(150 words)**

13. Volunteers & Interns

APPROXIMATELY HOW MANY VOLUNTEERS &/OR INTERNS ARE ENGAGED IN THE DELIVERY OF THE EVENT?

CALCULATE THE NUMBER OF VOLUNTEER HOURS THAT GO INTO THE DELIVERY OF THE EVENT.

LOOKING AT PREVIOUS YEARS, REPORT ON: NUMBER OF VOLUNTEERS NUMBER OF VOLUNTEER HOURS

20\_\_:

20\_\_:

20\_\_:

13. Volunteers & Interns *(continued)*

*What do your volunteers do? What do they gain from the experience of working with you?*

**(150 words)**

14. Support Materials – Marketing Collateral

*Please attach the following support materials (from previous years):*

REQUIRED ATTACHMENTS:

|  |  |
| --- | --- |
| ⬜ | (sample) print media ads |
| ⬜ | posters |
| ⬜ | other print materials |
| ⬜ | on-line and/or social media promotion |

IF AVAILABLE:

|  |  |
| --- | --- |
| ⬜ | radio or TV spots |
| ⬜ | media coverage of the event |

O R G A N I Z A T I O N A L C A P A C I T Y A N D / O R N E E D

Policy identifies four areas of assessment in respect of *‘organizational capacity and/or need’*:

* *Ability to Deliver the Program, Project or Initiative*
* *Evidence of Financial Need*
* *Evidence of Funding from Other Sources*
* *Evidence of Community Partners & Support*

15. Funding Request

GRANT REQUEST BUDGET

FOR STAFF USE ONLY

Grant Request as a
Percentage of the
Projected Program Budget

 %

$ $

*If you have previously received a grant for the proposed program, please complete
the following information for the last three years in which funding was received.*

GRANT YEAR GRANT RECEIVED REPORTED EXPENDITURES

20\_\_: $ $

20\_\_: $ $

20\_\_: $ $

16. Why is Funding Needed?

*What, specifically, will the grant be used for?*

*Please list other sources of community support, foundation grants, government funding or local business sponsorships that you are seeking or have secured.*

17. Program Budget and Financial Information

*Please confirm below that you have submitted the budget and financial information required as part of this application:*

|  |  |
| --- | --- |
| ⭘ | a completed *Community Events Budget Form** AVAILABLE ON A SEPARATE MS EXCEL FORM
 |
| ⭘ | a copy of your *Financial Statements* for the most recently completed fiscal year* PREPARED IN ACCORDANCE WITH GENERALLY ACCEPTED ACCOUNTING STANDARDS
* INCLUDING AT MINIMUM AN INCOME STATEMENT AND BALANCE SHEET
 |

D E C L A R A T I O N & S I G N A T U R E S

*I, the undersigned, certify that, to the best of my knowledge, all information provided in this application is accurate and true and is endorsed by the organization I represent.*

**SIGNATURE OF PERSON FILING THE APPLICATION NAME**

**TITLE WITH ORGANIZATION**

**DATE**

*The application may be submitted with an electronic signature (if available) or with a scanned copy of the signature page ONLY. In order to maintain the functionality of this document as a fillable .pdf, do NOT submit a printed and scanned copy of the entire form.*

APPLICATION PACKAGE

Applications should consist of: a *‘Client Profile,’* an *‘Application Form’* and a *‘Budget Form’* **PLUS** support materials as requested herein. It is the responsibility of the applicant to ensure that their application is complete, that all requested materials have been submitted and that all submission requirements have been satisfied.

ELECTRONIC SUBMISSION

Electronic submissions may be provided on a USB drive (memory stick) ***OR*** on a CD-R disc, then mailed or hand-delivered to the attention of *Arts & Culture Grants* at:

Delbrook Community Recreation Centre

851 West Queens Road,

North Vancouver, BC V7N 4E3

FILE SHARE

Submissions may also be provided via a web-based file-share platform (e.g. Dropbox)

NO FAX OR E-MAIL SUBMISSIONS

Application materials sent via fax or as email attachments will ***not*** be accepted.