

2.13.3 Program and applicant identification – Programming Component



Canadian Patrimoine
Heritage canadien

ARTS PRESENTATION CANADA – PROGRAMMING COMPONENT

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File number
Deadline

**Program and Applicant Identification
Presenter organizations and arts festivals**

1. Name of organization:					
2. Programming title:					
3. Type of programming <input type="checkbox"/> Festival <input type="checkbox"/> Season			4. Amount requested from the APC Program		
5. Director of organization <input type="checkbox"/> Mr. <input type="checkbox"/> Ms.				Title	
6. Person responsible for programming <input type="checkbox"/> Mr. <input type="checkbox"/> Ms.			Title		Telephone
7. Number of employees					
Paid			Unpaid (volunteer)		
Full-time		Part-time		Full-time	
				Part-time	
8. Disciplines involved in organization's present request					
<input type="checkbox"/> Music	<input type="checkbox"/> Dance	<input type="checkbox"/> Theatre	<input type="checkbox"/> Visual arts	<input type="checkbox"/> Literature	<input type="checkbox"/> Media arts
<input type="checkbox"/> Other _____					
9. Audiences specifically targeted by the organization's activities for this request					
<input type="checkbox"/> Young audience	<input type="checkbox"/> Cultural diversity	<input type="checkbox"/> Aboriginal	<input type="checkbox"/> Official language minority	<input type="checkbox"/> Rural or remote regions	
10. Presentation venues to be used by the organization for this request*					
Name		Capacity	Indicate (✓) whether the space is		
			Your own	Rented	Outdoors
			Other (specify)		
* If your programming activities take place in a venue other than those mentioned, give details in your application. If more space is required to list all presentation venues, attach a separate sheet.					
11. Brief description of the programming for which funding is sought. (Write a brief description in this box , not on an attached sheet. The description may be posted on the Canadian Heritage Web site if your programming receives funding.)					
12. Time frame					
Start and end date of the proposed activity: (YY/MM/DD)			Your fiscal year in which the programming will be included: (YY/MM/DD)		
From		To	From		To
13. Board Chair or President of organization <input type="checkbox"/> Mr. <input type="checkbox"/> Ms.			Signature of Board chair or President (or authorized person)		

