

**PRESENTATION BY INVITATION PROGRAM FOR  
NON-PROFESSIONAL ARTISTS**

**APPLICATION FORM**



**To be considered complete, this application form must be filled out using the format that has been provided.**

**1- PROJECT SUMMARY**

Name of festival, competition or exhibition to which you have been invited:

\_\_\_\_\_

Event location: \_\_\_\_\_

Event dates: \_\_\_\_\_

Grant requested: \$ \_\_\_\_\_

**2- APPLICANT INFORMATION**

Applicant Name: \_\_\_\_\_

Incorporated or registered since (if applicable): \_\_\_\_\_

Address: \_\_\_\_\_

City or town: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Contact person: \_\_\_\_\_ Title: \_\_\_\_\_

Phone (W): \_\_\_\_\_ (H): \_\_\_\_\_

Fax: \_\_\_\_\_

E-mail: \_\_\_\_\_

Website: \_\_\_\_\_

**Participants**

For more than one traveller, name each participant for whom this grant is being requested and their roles within the group. Use a separate sheet if more space is required:

<u>Name</u>	<u>Role</u>
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

**3- PROJECT DESCRIPTION** (use separate sheets if more space is required)

What is the purpose and general audience of the event that the applicant has been invited to attend?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Describe how the applicant will participate in this event. Include dates of participation and performance details, if applicable.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

How will participating in this event benefit the applicant?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

#### 4- BUDGET DETAILS

Please record the following:

[A] # of travellers requesting funding: \_\_\_\_\_

[B] # of full days of travel: \_\_\_\_\_

[C] Total accommodation expenses: \_\_\_\_\_ (Max \$120/night/traveller)

[D] Total airfare/train/bus costs: \_\_\_\_\_ (For all travellers)

[E] Total distance using own car(s): \_\_\_\_\_ (Only for cars going > 200 km)

[F] Taxi/parking/road toll expenses: \_\_\_\_\_

[G] Any packing/shipping costs: \_\_\_\_\_

N.B. Receipts for most travel expenses must be retained and submitted with the final report. See program guidelines for details.

#### **For Office Use Only**

##### **Calculation of eligible expenses**

Using the data recorded above, perform the following calculations. Note that each letter in a formula corresponds to an above data entry.

##### ***Eligible Living Expenses***

##### Formula

Eligible per diem (\$20/traveller/day): \_\_\_\_\_ **(A x B x \$20)**

Eligible accommodation expenses: \_\_\_\_\_ **(C x 50%)**

##### ***Eligible Transportation and Shipping Costs***

Eligible airfare/train/bus costs: \_\_\_\_\_ **(D x 50%)**

Eligible driving charges: \_\_\_\_\_ **(E x \$0.20)**

Eligible taxi/parking/road tolls: \_\_\_\_\_ **(F x 50%)**

Eligible packing/shipping costs: \_\_\_\_\_ **(G x 50%)**

**Total eligible expenses:** \_\_\_\_\_

## 5- OTHER SOURCES OF FUNDS

Aside from this grant request, is any other funding being requested or provided to help offset the applicant's expenses for this trip (i.e., by the event host, other government grants, the private sector, etc.)?

\_\_\_\_\_ (Yes/No)

**If "yes"**, on a separate sheet of paper, identify for each additional source of funds:

- The name of the organization providing the funding
- The \$ amount being requested or provided
- Whether the funding has been confirmed
- The general purpose of the funding and any limitations on how it can be used (i.e., to cover airfare, only for lodging expenses, etc.).

## 6- EVENT HOST DETAILS

Name of host organization: \_\_\_\_\_

Contact person: \_\_\_\_\_ Title: \_\_\_\_\_

Address: \_\_\_\_\_

Province/State: \_\_\_\_\_

Country: \_\_\_\_\_ Postal/Zip Code: \_\_\_\_\_

Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_

E-mail: \_\_\_\_\_

Event website: \_\_\_\_\_

## 7- APPLICANT CHECKLIST

**Before this application will be considered for funding**, the following information must be submitted to the Arts Development Branch:

- This application form with any additional sheets that were required, completed and signed;
- A letter of invitation from the event organiser to the applicant, describing the applicant's intended participation in the event;
- Detailed information on the arts festival, competition or exhibition, **as provided by the event organiser**;
- A biographic profile of the applicant, including a list of their artistic achievements, that clearly demonstrates that the applicant performs or exhibits their works regularly.

To improve the likelihood of receiving funding under this program, please submit any reviews, press clippings, details of awards, etc. that substantiate the applicant's talent in their artistic discipline.

## 8- DECLARATION

I hereby agree to provide all requested information as well as any other supporting documents needed to evaluate this application. I understand that my application may be disqualified if it is incomplete and that projects or parts of projects started or completed before this application is received will not be funded retroactively.

I recognize that applications are approved subject to available funds, and beyond the provision of a grant, the Province of New Brunswick has no further commitment to the applicant. The Province will not be held responsible for the completion of an activity.

I understand that any provincial funding that is received must be used in the manner described in this application form. I will return all excess funding, as required by this program, if the eligible expenses fall short of the projections upon which a grant is based. In the event that this project is cancelled, all funding granted under this program will be returned to the Department of Wellness, Culture and Sport.

I agree that my project will be completed by March 31, and a final report will be submitted to the Department within 30 days of the project's completion.

I agree to acknowledge the financial contribution of the Province of New Brunswick in all publicity related to the activities of the proposed project.

I certify that this applicant is based in New Brunswick, that I have signing authority for the applicant (if applicant is an organization or a minor), and that, to the best of my knowledge, the information provided with this application is accurate.

By signing this document, I understand that all applicant contact information may be available upon request to outside individuals or organizations. I also understand that the grant obtained and the amount awarded becomes public information.

***Note: If the applicant is an organization or a group rather than an individual, the signatory must be the head of the organization.***

Name: \_\_\_\_\_ Position/Title: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**ONCE COMPLETE, RETAIN A COPY OF THIS FORM AND ANY ACCOMPANYING DOCUMENTATION FOR YOUR RECORDS. SUBMIT THE ORIGINAL TO:**

Arts Development Branch  
Department of Wellness, Culture and Sport  
PO Box 6000 Fredericton, NB  
E3B 5H1

Tel: 506-453-2555  
Fax: 506-453-2416  
E-Mail: [Artsnb@gnb.ca](mailto:Artsnb@gnb.ca)  
Website: [www.gnb.ca](http://www.gnb.ca) (Keyword: Arts)