

# Urban Art Centres Operating Support

## Application Form

FOR OFFICE USE ONLY:

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

App. ID: \_\_\_\_\_

Note: The information collected using this form is required for the administration of this Manitoba Arts Council program and may be shared with other government departments/agencies with interests in your project. Information will not be disclosed to any other third parties except as allowed by The Freedom of Information and Protection of Privacy Act.

### Contact Information

Please provide a mailing address for your organization as well as an email address and phone number for two contacts. If this application is successful, payments are issued in the form of cheques made out to your organization. Cheques will be mailed to the address you provide below. All other correspondence will be sent by email to the primary contact.

Organization name

Mailing address

City/Town/Reserve

Province/Territory

Postal code

Website

#### Primary contact

#### Secondary contact

Name

Name

Title

Title

Email

Email

Phone

Phone

# Urban Art Centres Operating Support

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## Application Details

Incorporation date: \_\_\_\_\_

Business #: \_\_\_\_\_

## Required Supporting Information

- Role and mission statement.
- Constitution and/or by-laws, if not already submitted as part of a previous application to this program.
- Current list of board of directors.
- Staffing summary including full-time and part-time staff.
- Current strategic plan and/or business plan.
- Programming plans for the coming year.
- Most recent Annual Report and Audited Financial Statements provided to the Manitoba Arts Council within 120 days of your fiscal year-end (a pro-forma statement is acceptable if the client's fiscal year is not over at the time of application).
- Board-approved budget for coming year, including the proposed Urban Art Centres Operating Support grant.
- A use-of-surplus plan must be submitted should an accumulated surplus exceed 50% of annual revenues. A deficit reduction plan must be submitted in the event of an accumulated deficit.

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## Declaration

We, the undersigned:

- have read and understood the program guidelines and understand that failure to comply with these guidelines may result in forfeiture of the grant and may jeopardize consideration of future grant requests;
- understand that if this application is successful, our organization will receive a first instalment of the approved amount and that by accepting this payment, we agree to:
  - spend the funds as proposed and approved (MAC requires repayment of funds not used for the proposed and approved purposes);
  - notify MAC in writing as soon as possible to seek appropriate approval in the event of changes to the size, scope or dates of the project;
  - acknowledge the assistance of MAC in all promotional materials for which support was provided; and
  - complete a narrative and financial report using the form provided by MAC and submit it by the due date specified in the program guidelines.

We certify the statements and information contained in this application are accurate and complete.

### Primary contact

### Secondary contact

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Signature

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Signature

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Name

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Name

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Title

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Title

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Date

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Date