

# Share - Artists in Schools



## Offline Application Form

Application deadlines: June 5 and October 5

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This is the application form for offline submissions to the **Share – Artists in Schools** grant. This application form is intended for applicants who are D/deaf or living with a disability who require an accessible application, or those who have limited internet access.

We strongly recommend that you have the Share – Artists in Schools grant guidelines and MAC's general guidelines with you while you work on your application.

To complete your application, fill out the following forms:

- Section A - Applicant details
- Section B – Registration details
- Section C – Project Information
- Section D – School Information
- Section E – School Commitment Form
- Section F – Project Cost Calculator
- Section G – Support Material
- Section H – Collaborators (optional)
- Section I – Additional information (optional)
- Section J – Declaration
- Section K – Voluntary Identification (optional)

Submit a complete application including your support material to the Manitoba Arts Council on the day of the deadline by mail, email or by delivering it in-person.

Note: if the deadline falls on a weekend or statutory holiday, we will accept your application on the following business day.

If you are submitting your application by mail, make sure that the envelope is post-marked on the date of the deadline (or earlier).

## Contact us

Manitoba Arts Council  
525-93 Lombard Avenue,  
Winnipeg, MB R3B 3B1  
[helpdesk@artscouncil.mb.ca](mailto:helpdesk@artscouncil.mb.ca)  
Telephone: (204) 945-2237  
Toll-Free: 1 (866) 994-2787  
[www.artscouncil.mb.ca](http://www.artscouncil.mb.ca)

Office Hours  
8:30 am to 4:30 pm, Monday to Friday, closed for  
lunch from 12:30 pm to 1:30 pm.

The Manitoba Arts Council carries out its work on the original lands of the Anishinaabeg, Anishinewuk, Dakota Oyate, Denesuline and Nehethowuk Nations, and on the National Homeland of the Red River Métis. We acknowledge that northern Manitoba includes ancestral lands of the Inuit. Our office is located on Treaty One territory, but our work extends throughout Treaties Two, Three, Four, and Five.

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### Section A - Applicant details [part 1/2]

*For individual applicant, group and organization contacts*

Are you applying as (check only one):

- ☐ An individual
- ☐ A group
- ☐ An organization

|                                                                                                                                                                                        |                    |                 |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------|-----------------|
| Legal first name                                                                                                                                                                       | Legal middle name  | Legal last name |
| Other name*                                                                                                                                                                            |                    | Pronouns        |
| Preferred name<br><input type="checkbox"/> Other name <input type="checkbox"/> Legal first name legal last name <input type="checkbox"/> Other name (Legal first name Legal last name) |                    |                 |
| Address                                                                                                                                                                                |                    |                 |
| City/Town/Reserve                                                                                                                                                                      | Province/Territory | Postal code     |
| Primary email                                                                                                                                                                          |                    |                 |
| Secondary email                                                                                                                                                                        |                    |                 |
| Primary phone                                                                                                                                                                          | Work phone         |                 |
| Mobile phone                                                                                                                                                                           | Fax number         |                 |

\* If you use a different name in your professional career, such as a stage name or a chosen name, please enter it in full. For example, if your legal name is Jonathan Smith but you prefer to be called John, enter "John Smith."

For individuals, your first and last name will appear on your cheque. It will also appear on the T4A for tax purposes. T4A forms will be issued to individuals for amounts received in excess of \$500.00. Your professional name will be used on all correspondence and announcements.

For organizations and groups, the details above is for the primary contact that will receive all correspondence and is authorized to submit a grant application on behalf of the organization or group. The group or organization name will appear on your cheque.

Note: The Manitoba Arts Council is subject to the Freedom of Information and Protection of Privacy Act (FIPPA). The information you provide is protected under that Act. For more on this, please read MAC's policy on the use of personal information

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### Section A - Applicant details [part 2/2]

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*For all applicant types*

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#### Additional information

Attach the document required for your applicant type

##### Individual:

- An artistic resume or curriculum vitae

**Note:** Your resume or CV should demonstrate a level of professional experience suitable to your chosen role (e.g., professional artist, arts/cultural professional) in each of the artistic disciplines you have selected.

##### Group:

- A group history
- A bio, artistic resume or curriculum vitae for each key group member

##### Organization:

- An organizational history

**Note:** Your history must indicate your organization's mission, vision, and mandate.

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### Section B.1 - Registration details for individuals [part 1/1]

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*For individual applicants*

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Confirm the following:

- ☐ I am a Canadian citizen or permanent resident of Canada
- ☐ I am a resident of Manitoba
- ☐ I am 18 years of age or older

I am applying for this grant as:

- ☐ A professional artist
- ☐ An arts/cultural professional
- ☐ An Indigenous Knowledge Keeper

**Note:** Definitions for each applicant type can be found in MAC's General Guidelines.

#### Artistic discipline

Check all disciplines that are applicable to you as an individual applicant:

- |                                                 |                                |                                     |                                        |
|-------------------------------------------------|--------------------------------|-------------------------------------|----------------------------------------|
| <input type="checkbox"/> Craft                  | <input type="checkbox"/> Dance | <input type="checkbox"/> Inter-arts | <input type="checkbox"/> Literary arts |
| <input type="checkbox"/> Media arts             | <input type="checkbox"/> Music | <input type="checkbox"/> Theatre    | <input type="checkbox"/> Visual arts   |
| <input type="checkbox"/> Other (specify): _____ |                                |                                     |                                        |

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### Section B.2 - Registration details for groups [part 1/1]

*For group contacts*

I am applying for this grant on behalf of an artistic group who meets the following criteria:

- ☐ The majority of the members of the professional arts group are residents of Manitoba

Note: Definitions for each applicant type can be found in MAC's General Guidelines.

|                   |                    |
|-------------------|--------------------|
| Group name        |                    |
| Address           |                    |
| City/Town/Reserve | Province/Territory |
| Postal code       | Primary phone      |
| Website           | Fax number         |

\*Check all disciplines that are applicable to your group:

- |                                                 |                                |                                     |                                        |
|-------------------------------------------------|--------------------------------|-------------------------------------|----------------------------------------|
| <input type="checkbox"/> Craft                  | <input type="checkbox"/> Dance | <input type="checkbox"/> Inter-arts | <input type="checkbox"/> Literary arts |
| <input type="checkbox"/> Media arts             | <input type="checkbox"/> Music | <input type="checkbox"/> Theatre    | <input type="checkbox"/> Visual arts   |
| <input type="checkbox"/> Other (specify): _____ |                                |                                     |                                        |

List up to a maximum of four key group members.

|    |             |            |
|----|-------------|------------|
| 1. | First name* | Last name* |
|    | Email*      | Phone*     |
| 2. | First name  | Last name  |
|    | Email       | Phone      |
| 3. | First name  | Last name  |
|    | Email       | Phone      |
| 4. | First name  | Last name  |
|    | Email       | Phone      |

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### Section B.3 - Registration details for organizations [part 1/2]

#### *For organization contacts*

I am applying for this grant on behalf of an organization who meets the following criteria:

- ☐ The organization is based in Manitoba
- ☐ The organization has been active in the province for at least one year prior to applying for funding

My organization is a:

- ☐ Professional not-for-profit arts organization
- ☐ Professional for-profit arts organization
- ☐ Professional arts service organization
- ☐ Community not-for-profit organization

Notes:

- Organizations receiving operating funding from the Manitoba Arts Council are not eligible to apply for this grant.
- Definitions for each applicant type can be found in MAC's General Guidelines.

|                                       |                    |                                           |
|---------------------------------------|--------------------|-------------------------------------------|
| Organization name                     |                    |                                           |
| Address                               |                    |                                           |
| City/Town/Reserve                     | Province/Territory | Postal code                               |
| Primary phone                         | Fax number         |                                           |
| Website                               |                    |                                           |
| Date of incorporation (if applicable) |                    | Registered charity number (if applicable) |

\*Check all disciplines that are applicable to your organization:

- |                                                 |                                |                                     |                                        |
|-------------------------------------------------|--------------------------------|-------------------------------------|----------------------------------------|
| <input type="checkbox"/> Craft                  | <input type="checkbox"/> Dance | <input type="checkbox"/> Inter-arts | <input type="checkbox"/> Literary arts |
| <input type="checkbox"/> Media arts             | <input type="checkbox"/> Music | <input type="checkbox"/> Theatre    | <input type="checkbox"/> Visual arts   |
| <input type="checkbox"/> Other (specify): _____ |                                |                                     |                                        |

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### Section C - Project Information [part 1/11]

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*For all applicant types*

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#### Project title

This should be a brief description of your project and proposed activity. MAC staff and assessors can use this field to identify your application.

Project title:

#### Project dates

Payments on awarded grants will be released one month before this date at the earliest.

The activity for which you are applying for funding should not start before the deadline

Project start date:

Project end date:

#### Grade level(s) of the students involved in this project

Approximate number of students involved in this project: \_\_\_\_\_

#### Artistic discipline

Check all disciplines that are applicable to you as an individual applicant:

- |                                                                         |                                  |                                        |                                     |
|-------------------------------------------------------------------------|----------------------------------|----------------------------------------|-------------------------------------|
| <input type="checkbox"/> Craft                                          | <input type="checkbox"/> Dance   | <input type="checkbox"/> Literary arts | <input type="checkbox"/> Media arts |
| <input type="checkbox"/> Music                                          | <input type="checkbox"/> Theatre | <input type="checkbox"/> Visual arts   | <input type="checkbox"/>            |
| <input type="checkbox"/> Multi disciplinary/Inter-arts (specify): _____ |                                  |                                        |                                     |
| <input type="checkbox"/> Other (specify): _____                         |                                  |                                        |                                     |

















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## Section C - Project Information [part 10/11]

*For all applicant types*

Note that the resume/CV in your profile will automatically be included in this application.

Word count: maximum of 200 words

This image shows a full page of white paper with horizontal black lines, resembling notebook paper. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.



# Share - Artists in Schools

## Offline Application Form

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### Section D - School Information [part 1/1]

*For all applicant types*

#### 1. Enter the school name, division, and mailing address:

|                   |             |
|-------------------|-------------|
| School name       |             |
| School Division   |             |
| Street            |             |
| City/Town/Reserve | Postal code |

Note: The information above is needed to identify the school and to determine whether this application is eligible for the Northern and Remote allowance.

#### 2. Enter the school contact's details:

|               |            |           |
|---------------|------------|-----------|
| Prefix        | First name | Last name |
| Primary email |            |           |

Inviting a school contact person is needed for MAC to communicate directly with the school. The contact you list here will receive an email confirmation when this application is submitted and when a funding decision has been made. After your project is over, the school contact will be mailed or emailed a link to a survey that everyone involved with the project can complete to provide feedback on the project and the Artists in Schools program.

### Section E - School Commitment Form Instruction [part 1/1]

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#### *For all applicant types*

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A School Commitment Form signed by the principal must be submitted as part of each application. This form is the basis of the partnership between the artist and the school, and it represents the school's commitment to the project. This may include a financial contribution.

The School Commitment Form must also indicate that all artists and collaborators listed in the application have been approved by the school to work with students. Schools may ask for recent Police Record/Vulnerable Sector and Child Abuse Registry checks as part of this process. Applications will be deemed ineligible if the School Commitment Form is incomplete, including if any artists, arts/cultural professionals, Indigenous Knowledge Keepers, and collaborators listed in the application form are not also listed and approved by the school.

1. Ask your contact at the school to complete a School Commitment Form
2. This form is available on the Manitoba Arts Council website and the Artists in Schools. You can also ask MAC's Help Desk to send you a copy of the form.
3. Attach the completed and signed form to your application
4. If submitting the form as a digital file, be sure to include the name of the school in the file name

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### Section F - Project Cost Calculator [part 1/1]

*For all applicant types*

Complete the form below to determine the cost of the proposed project. Some sections may not apply to your project. Skip any fields that do not apply.

#### Primary artist costs

##### 1. Primary applicant fees

|                                       |                                   |                           |
|---------------------------------------|-----------------------------------|---------------------------|
| Hours working directly with students: | Hours providing teacher training: | Hours of prep:            |
| Subtotal: Artist fee                  | Subtotal: Prep fee                | Total: Primary Artist fee |

**Note:** "Artist fees" are calculated at a rate of \$50 per hour of student contact time. "Preparation fees" are calculated at a rate of \$25 per hour.

##### Primary applicant travel

Complete the following fields if the primary artist is traveling more than 20kms to another community.

##### 2. Travel by plane

|          |                               |                            |
|----------|-------------------------------|----------------------------|
| Airfare: | Hours of flight (round-trip): | Taxi cost:                 |
|          | Subtotal: Air travel time     | Total: Air travel expenses |

**Note:** "Air travel time" is calculated at \$20 per flight hour.

##### 3. A. Travel with own vehicle

|                                       |                                                     |       |
|---------------------------------------|-----------------------------------------------------|-------|
| Distance one-way from home to school: | Number of one-way trips to and from home to school: |       |
| Subtotal: Mileage                     | Subtotal: Car travel time                           | Total |

**Note:** Mileage is paid to help offset costs of gas and wear and tear of your own vehicle. "Mileage" is calculated at a rate of \$0.45 per km, rounded to the nearest dollar. Mileage cannot be claimed for rented vehicles. "Car travel time" is calculated at \$20 per 100 kms traveled, rounded to the nearest dollar.

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### Primary artist costs, continued

#### 3. B. Travel with rented vehicle

Total cost of rental and gas:

### Primary applicant accommodations

Complete the following fields if the primary artist is traveling more than 100kms to another community.

#### 4. Accommodations & Per diem

**Note:** Per diem is paid to offset the cost of meals while traveling. "Per diem" is calculated at:

- South of 53rd parallel - \$ 75/ day
- North of 53rd parallel –\$ 90/day

|                    |                      |                               |
|--------------------|----------------------|-------------------------------|
| Number of nights   | Room rate and taxes  |                               |
| Subtotal: Per diem | Subtotal: Hotel cost | Total: Accommodation Expenses |

### Project administration fee

#### 5. Project administration fee

A project administration fee to be paid to the primary applicant must be added to the project costs. "Project administration fees" are based on 10% of primary artist's student contact hours and are paid at the rate of \$25 per hour.

|                                      |                                        |
|--------------------------------------|----------------------------------------|
| Hours working directly with students |                                        |
| _____ hours X 0.1 =                  | _____ X \$25                           |
|                                      | Total: Project administration fee<br>= |

### Total primary applicant fees and travel

|                                   |                                |                             |                                   |                                 |
|-----------------------------------|--------------------------------|-----------------------------|-----------------------------------|---------------------------------|
| (1) Total Primary Applicant fees: | (2) Total Air Travel Expenses: | (3) Total Vehicle Expenses: | (4) Total Accommodation Expenses: | (5) Project administration fee: |
|                                   |                                |                             |                                   |                                 |
| Total overall:                    |                                |                             |                                   |                                 |

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### Collaborator costs (if applicable)

Fill out a Collaborators costs form for each collaborator involved in the project.

Collaborator name:

#### 1. Collaborator Fees

|                                      |                                  |                    |                         |
|--------------------------------------|----------------------------------|--------------------|-------------------------|
| Hours working directly with students | Hours providing teacher training | Hours of prep      | Flat fee*               |
|                                      | Subtotal: collaboration fee      | Subtotal: Prep fee | Total: Collaborator fee |

**Note:** "Collaboration fees" are calculated at a rate of \$50 per hour of student contact time.

"Preparation fees" are calculated at a rate of \$25 per hour.

\*If the collaborator will not be working with students, use the "flat fee" field only.

#### Collaborator travel

#### 2. Travel by plane

|         |                           |                            |
|---------|---------------------------|----------------------------|
| Airfare | Hours of flight           | Taxi cost                  |
|         | Subtotal: Air travel time | Total: Air travel expenses |

**Note:** "Air travel time" is calculated at \$20 per flight hour.

#### 3. Travel by car

|                                                                                              |                                      |                                                          |
|----------------------------------------------------------------------------------------------|--------------------------------------|----------------------------------------------------------|
| Is the collaborator a passenger?<br><input type="checkbox"/> Yes <input type="checkbox"/> No | Distance one-way from home to school | Number of trips one-way trips to and from home to school |
| Subtotal: Mileage                                                                            | Subtotal: Car travel time            | Total: Car travel expenses                               |

**Note:** Mileage is only paid to collaborators that travel using their own vehicle and is paid to help offset costs of gas and wear and tear of your own vehicle. "Mileage" is calculated at a rate of \$0.45 per km, rounded to the nearest dollar. Mileage cannot be claimed for rented vehicles. "Car travel time" is calculated at \$20 per 100 kms traveled, rounded to the nearest dollar. If the collaborator is a passenger, they are compensated for their time, but not for mileage on the vehicle.

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### Collaborator costs (if applicable), continued

Collaborator name:

#### Collaborator accommodations

##### 4. Collaborator accommodations and per diem

Complete the following fields if this collaborator is traveling more than 100kms to another community.

**Note:** Per diem is paid to offset the cost of meals while traveling. "Per diem" is calculated at:

- South of 53rd parallel - \$ 75/day
- North of 53rd parallel - \$ 90/day

|                    |                      |                               |
|--------------------|----------------------|-------------------------------|
| Number of nights   | Room rate and taxes  |                               |
| Subtotal: Per diem | Subtotal: Hotel cost | Total: Accommodation expenses |

#### Total collaborator costs

|                             |                               |                            |                                  |
|-----------------------------|-------------------------------|----------------------------|----------------------------------|
| (1) Total Collaborator Fees | (2) Total Air Travel Expenses | (3) Total Vehicle Expenses | (4) Total Accommodation Expenses |
|                             |                               | Total Overall              |                                  |

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### Materials, supplies, and/or equipment

Enter total cost of materials, supplies and/or equipment. Include shipping if applicable. Use whole number, no cents.

**Note:** Do not include the value of materials, supplies or equipment provided in-kind.

Describe the materials, supplies, and/or equipment needed to complete this project.

This image shows a blank sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

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### Revenue contributions

#### 1. Cash contributions

|                                 |                                           |
|---------------------------------|-------------------------------------------|
| Total school cash contribution: | Other cash contributions (if applicable): |
|                                 | Total overall:                            |

**Note:** Do not include in-kind contributions.

#### 2. Description

Briefly describe the other cash contributions

|  |
|--|
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |

### Grant Amount Request

#### 1. Total project costs

|                               |                           |                              |
|-------------------------------|---------------------------|------------------------------|
| Total primary applicant cost: | Total collaborator costs: | Total material costs:        |
|                               |                           | Total overall project costs: |

#### 2. Grant amount request

|                      |                           |
|----------------------|---------------------------|
| Total project costs: | Total cash contributions: |
|                      | Grant Amount Request:     |

**Note:** "Grant amount request" equals the total project costs minus cash contributions.

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## Section G - Support Material Instruction

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*For all applicant types*

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Support material is one of the most important parts of your grant application. The assessment panel, who decide whether your project will be funded, will view these examples of your work to see the type and quality of art you create. These materials can include writing samples, images, videos, audio recordings, and more.

Support material should be samples of your current or past work, and it should relate to and/or support your proposed project; it may include the work/activities of other key collaborators or partners.

### **Quantity of support material allowed**

Submit a minimum of one, and up to a maximum of three items of support material.

The following count as **one item**:



up to 5 images **OR**



up to 15 pages of text **OR**



up to 4 minutes of audio or video

For instance, your three items can be a total of 15 images, or 45 pages of text, or 12 minutes of audio/video. But you can also submit a combination of images, text, and recordings, as long as it falls within the limits. Do not submit original work or the only copy you have. Support material will not be returned.

### **How to submit support material**

Support material may be submitted on a DVD, CD, USB or sent by email to [helpdesk@artscouncil.mb.ca](mailto:helpdesk@artscouncil.mb.ca). For audio/video files, you may also enter a link toward Vimeo, YouTube, SoundCloud or Bandcamp.

If you are submitting digital files, make sure that the file names you provide in the follow form match the names of the digital files you are submitting.

For further details see Support Material Requirements in MAC's General Guidelines.

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### Section G - Support Material [part 1/4]

*For all applicant types*

|                                                                                                                      |               |
|----------------------------------------------------------------------------------------------------------------------|---------------|
| File name or link: <input type="checkbox"/> Image <input type="checkbox"/> Text <input type="checkbox"/> Audio/video |               |
| Title                                                                                                                | Year Produced |
| Applicant's role                                                                                                     |               |
| <b>Image:</b> Dimension, medium; <b>Text:</b> # of pages; <b>Audio/video:</b> start time/end time                    |               |

|                                                                                                                      |               |
|----------------------------------------------------------------------------------------------------------------------|---------------|
| File name or link: <input type="checkbox"/> Image <input type="checkbox"/> Text <input type="checkbox"/> Audio/video |               |
| Title                                                                                                                | Year Produced |
| Applicant's role                                                                                                     |               |
| <b>Image:</b> Dimension, medium; <b>Text:</b> # of pages; <b>Audio/video:</b> start time/end time                    |               |

|                                                                                                                      |               |
|----------------------------------------------------------------------------------------------------------------------|---------------|
| File name or link: <input type="checkbox"/> Image <input type="checkbox"/> Text <input type="checkbox"/> Audio/video |               |
| Title                                                                                                                | Year Produced |
| Applicant's role                                                                                                     |               |
| <b>Image:</b> Dimension, medium; <b>Text:</b> # of pages; <b>Audio/video:</b> start time/end time                    |               |

|                                                                                                                      |               |
|----------------------------------------------------------------------------------------------------------------------|---------------|
| File name or link: <input type="checkbox"/> Image <input type="checkbox"/> Text <input type="checkbox"/> Audio/video |               |
| Title                                                                                                                | Year Produced |
| Applicant's role                                                                                                     |               |
| <b>Image:</b> Dimension, medium; <b>Text:</b> # of pages; <b>Audio/video:</b> start time/end time                    |               |

|                                                                                                                      |               |
|----------------------------------------------------------------------------------------------------------------------|---------------|
| File name or link: <input type="checkbox"/> Image <input type="checkbox"/> Text <input type="checkbox"/> Audio/video |               |
| Title                                                                                                                | Year Produced |
| Applicant's role                                                                                                     |               |
| <b>Image:</b> Dimension, medium; <b>Text:</b> # of pages; <b>Audio/video:</b> start time/end time                    |               |

# Share - Artists in Schools

## Offline Application Form

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### Section G - Support Material [part 2/4]

*For all applicant types*

|                                                                                                                      |               |
|----------------------------------------------------------------------------------------------------------------------|---------------|
| File name or link: <input type="checkbox"/> Image <input type="checkbox"/> Text <input type="checkbox"/> Audio/video |               |
| Title                                                                                                                | Year Produced |
| Applicant's role                                                                                                     |               |
| <b>Image:</b> Dimension, medium; <b>Text:</b> # of pages; <b>Audio/video:</b> start time/end time                    |               |

|                                                                                                                      |               |
|----------------------------------------------------------------------------------------------------------------------|---------------|
| File name or link: <input type="checkbox"/> Image <input type="checkbox"/> Text <input type="checkbox"/> Audio/video |               |
| Title                                                                                                                | Year Produced |
| Applicant's role                                                                                                     |               |
| <b>Image:</b> Dimension, medium; <b>Text:</b> # of pages; <b>Audio/video:</b> start time/end time                    |               |

|                                                                                                                      |               |
|----------------------------------------------------------------------------------------------------------------------|---------------|
| File name or link: <input type="checkbox"/> Image <input type="checkbox"/> Text <input type="checkbox"/> Audio/video |               |
| Title                                                                                                                | Year Produced |
| Applicant's role                                                                                                     |               |
| <b>Image:</b> Dimension, medium; <b>Text:</b> # of pages; <b>Audio/video:</b> start time/end time                    |               |

|                                                                                                                      |               |
|----------------------------------------------------------------------------------------------------------------------|---------------|
| File name or link: <input type="checkbox"/> Image <input type="checkbox"/> Text <input type="checkbox"/> Audio/video |               |
| Title                                                                                                                | Year Produced |
| Applicant's role                                                                                                     |               |
| <b>Image:</b> Dimension, medium; <b>Text:</b> # of pages; <b>Audio/video:</b> start time/end time                    |               |

|                                                                                                                      |               |
|----------------------------------------------------------------------------------------------------------------------|---------------|
| File name or link: <input type="checkbox"/> Image <input type="checkbox"/> Text <input type="checkbox"/> Audio/video |               |
| Title                                                                                                                | Year Produced |
| Applicant's role                                                                                                     |               |
| <b>Image:</b> Dimension, medium; <b>Text:</b> # of pages; <b>Audio/video:</b> start time/end time                    |               |

# Share - Artists in Schools

## Offline Application Form

Application deadlines: June 5 and October 5



### Section G - Support Material [part 3/4]

*For all applicant types*

|                                                                                                                      |               |
|----------------------------------------------------------------------------------------------------------------------|---------------|
| File name or link: <input type="checkbox"/> Image <input type="checkbox"/> Text <input type="checkbox"/> Audio/video |               |
| Title                                                                                                                | Year Produced |
| Applicant's role                                                                                                     |               |
| <b>Image:</b> Dimension, medium; <b>Text:</b> # of pages; <b>Audio/video:</b> start time/end time                    |               |

|                                                                                                                      |               |
|----------------------------------------------------------------------------------------------------------------------|---------------|
| File name or link: <input type="checkbox"/> Image <input type="checkbox"/> Text <input type="checkbox"/> Audio/video |               |
| Title                                                                                                                | Year Produced |
| Applicant's role                                                                                                     |               |
| <b>Image:</b> Dimension, medium; <b>Text:</b> # of pages; <b>Audio/video:</b> start time/end time                    |               |

|                                                                                                                      |               |
|----------------------------------------------------------------------------------------------------------------------|---------------|
| File name or link: <input type="checkbox"/> Image <input type="checkbox"/> Text <input type="checkbox"/> Audio/video |               |
| Title                                                                                                                | Year Produced |
| Applicant's role                                                                                                     |               |
| <b>Image:</b> Dimension, medium; <b>Text:</b> # of pages; <b>Audio/video:</b> start time/end time                    |               |

|                                                                                                                      |               |
|----------------------------------------------------------------------------------------------------------------------|---------------|
| File name or link: <input type="checkbox"/> Image <input type="checkbox"/> Text <input type="checkbox"/> Audio/video |               |
| Title                                                                                                                | Year Produced |
| Applicant's role                                                                                                     |               |
| <b>Image:</b> Dimension, medium; <b>Text:</b> # of pages; <b>Audio/video:</b> start time/end time                    |               |

|                                                                                                                      |               |
|----------------------------------------------------------------------------------------------------------------------|---------------|
| File name or link: <input type="checkbox"/> Image <input type="checkbox"/> Text <input type="checkbox"/> Audio/video |               |
| Title                                                                                                                | Year Produced |
| Applicant's role                                                                                                     |               |
| <b>Image:</b> Dimension, medium; <b>Text:</b> # of pages; <b>Audio/video:</b> start time/end time                    |               |

## Section G - Support Material [part 4/4]

*For all applicant types*

## Support material description

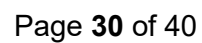
Describe how the support material relates to this application.

Word count: maximum of 500 words

This image shows a full page of white paper with horizontal blue ruling lines. The lines are evenly spaced and run across the width of the page, providing a template for handwriting practice or general writing. There are no margins, text, or other markings on the page.

# Offline Application Form

This image shows a single page of white paper with horizontal blue or grey ruling lines. The lines are evenly spaced and run across the width of the page, leaving small margins at the top and bottom. There are no vertical margin lines, text, or other markings on the page.



# Share - Artists in Schools

## Offline Application Form

Application deadlines: June 5 and October 5



### Section H. Collaborators [part 1/2; optional]

*For all applicant types*

#### Collaborator biography

- Attach bios for key collaborators.

#### Collaborator details

Enter information for each collaborator in the form below.

|                   |                   |
|-------------------|-------------------|
| Collaborator Name |                   |
| Discipline        | City/Town/Reserve |
| Collaborator Name |                   |
| Discipline        | City/Town/Reserve |
| Collaborator Name |                   |
| Discipline        | City/Town/Reserve |
| Collaborator Name |                   |
| Discipline        | City/Town/Reserve |
| Collaborator Name |                   |
| Discipline        | City/Town/Reserve |
| Collaborator Name |                   |
| Discipline        | City/Town/Reserve |
| Collaborator Name |                   |
| Discipline        | City/Town/Reserve |
| Collaborator Name |                   |
| Discipline        | City/Town/Reserve |
| Collaborator Name |                   |
| Discipline        | City/Town/Reserve |

*For all applicant types*

Explain why you chose to work with them and what they bring to the project.

Word count: maximum of 750 words

This image shows a full page of white paper with horizontal blue or grey ruling lines. The lines are evenly spaced and run across the width of the page, typical of notebook paper. There are no margins, text, or other markings on the page.

# Offline Application Form



Application deadlines: June 5 and October 5

This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

# Offline Application Form

This image shows a full page of white paper with horizontal ruling lines. The lines are evenly spaced and extend across the width of the page. There are no margins, text, or other markings on the paper.



# Offline Application Form



CONSEIL DES  
ARTS DU  
**MANITOBA**  
ARTS COUNCIL

*For all applicant types*

[illegible]

# Offline Application Form



Application deadlines: June 5 and October 5

This image shows a single page of white paper with horizontal blue or grey ruling lines. The lines are evenly spaced and run across the width of the page, leaving small margins at the top and bottom. There is no handwriting or printed text on the page.

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### Section J. Declaration [part 1/1]

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*For all applicant types*

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#### Translation

MAC welcomes applications in English and French. Where an application is submitted in French, MAC will engage a bilingual assessor who is familiar with the discipline. Portions of the application will also be translated into English for use in the jury or panel process, in addition to being provided in the original language. When portions of an application are to be translated, the applicant has the option of having MAC provide the translation or of hiring a translator of their choice and being reimbursed for their expenses at a rate of \$0.27 per word.

- ☐ I am completing this application in English.
- ☐ I am completing this application in French and I will contract my own translator.
- ☐ I am completing this application in French and MAC can send my application for translation.

#### Communication

How would you like to receive written communication from the Manitoba Arts Council?

- ☐ By email
- ☐ By postal mail

#### Declaration

- ☐ I hereby declare that the information above is correct to the best of my knowledge.
- ☐ I understand that my eligibility must be approved by Manitoba Arts Council staff before my application is considered.
- ☐ I confirm that I have gone through the grant-specific guidelines included in this package and that I have also reviewed MAC's general guidelines for completing grant applications.
- ☐ I understand that this application form is intended for applicants who are D/deaf or living with a disability who require an accessible application, or those who have limited internet access.

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**Signature**

---

**Date**

### Section K - Voluntary identification information

[part 1/3; optional]

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*For all applicant types*

---

The Manitoba Arts Council is committed to supporting artistic practices that reflect the diversity of Manitoba's population. You are invited to complete the voluntary identification portion of this profile registration. This is entirely optional. This information will be used to monitor how well MAC grants reflect the full diversity of who we are as a province. You can see how we use this information on MAC's website. This information will not be used in the assessment process and will not be made available to assessors. For further information, please read MAC's policy on the use of personal information.

#### What is your primary language?

- ☐ English
- ☐ French
- ☐ Indigenous language Specify:
- ☐ Sign language Specify:
- ☐ Other language Specify:

Do you speak, read and/or understand the following:

#### English

- ☐ Speak
- ☐ Read
- ☐ Understand

#### French

- ☐ Speak
- ☐ Read
- ☐ Understand

#### Other (specify):

- ☐ Speak
- ☐ Read
- ☐ Understand

#### Birth year:

#### Gender:

- ☐ Female
- ☐ Male
- ☐ Non-Binary
- ☐ Other (specify):

### Section I - Voluntary identification information

[part 2/3; optional]

---

*For all applicant types*

---

Do you identify as any of the following:

☐ **Indigenous**

- ☐ First Nations
- ☐ Metis
- ☐ Inuit
- ☐ Other (specify):

What is the Indigenous community that you belong to?

☐ **Francophone**

- ☐ Franco-Manitoban
- ☐ Francophone from Quebec
- ☐ Francophone from another part of Canada
- ☐ Francophone from France
- ☐ Francophone from another country. Specify:
- ☐ I learned French as an additional language
- ☐ Other (specify):

☐ **Black and/or a Person of Colour**

- ☐ Black. Specify:
- ☐ Person of colour. Specify:

**D/deaf**

Please select 'Yes' if you are D/deaf, deafened or hard of hearing.

- ☐ Yes. Specify:

Financial assistance may be available for applicants who are Deaf. See MAC's accessibility page for further information.

### Section I - Voluntary identification information

[part 3/3; optional]

---

*For all applicant types*

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#### **Living with a disability (including physical, psychiatric, and intellectual disabilities)**

Please select 'Yes' if you live with any type of disability, including physical, psychiatric, and intellectual disabilities.

☐ Yes. Specify:

Financial assistance may be available for applicants who live with a disability. See MAC's accessibility page for further information.

#### **2SLGBTQ+**

Please select this option if you identify as Two-Spirit, lesbian, gay, bisexual, transgender, queer, or part of the 2SLGBTQ+ community in any other way.

☐ Yes. Specify:

#### **Part of any other underserved community**

☐ Yes. Specify:

#### **Assessor selection**

As an individual applicant, you are automatically considered for membership in upcoming assessment panels. If you would like MAC to take into account the information you share in this section when putting together assessment panels (so that you can help assess applications where your background and insights might be especially valuable), we ask you to give us permission for that by checking the box marked 'I agree' below. You may withdraw your permission whenever you want by unchecking that same box.

The information I provide in this section may be used by MAC when considering me for membership in upcoming assessment panels

☐ Agree