

Art & Entrepreneurship Spirit Grant Application

APPLICANT INFORMATION:

Name: _____ Date: _____

Address: _____

Phone #: _____ Email: _____

Tsartlip Band membership number: _____ Grant amount: \$500.00 or \$1000.00

Project Description:

Grant funding will be applied to (please check field that applies best):

Digital/Film	Textile e.g. knitting/ weaving	Carving	Dance	Music	Storytelling
Writing	Multi- Disciplinary	Other (describe):			

Briefly describe your project:

How will the funding be used? (check those that apply)

Purchase supplies	Purchase equipment	Pay for course fee or Certification related to your project.	Pay for rental space (to assist with the development of your project)
Pay for business development plan	Other (describe):		

How will this project contribute to your work as an artist/entrepreneur?

What strengths and skills can you share with other artists/entrepreneurs?

PROJECTED COST (INCLUDE ALL OF THE COSTS THAT WILL BE COVERED WITH GRANT FUNDS):

Type of Expenditure	Projected Cost	Supplier:
Equipment (describe):		
Materials (describe):		
Course/certification (describe):		
Equipment/space rental (describe):		
Business plan development (describe):		
Other (describe):		
Total Request: \$		

Project Start Date: _____

Project Completion Date: _____

If my project receives funding, I agree to the all the following requirements:

- ✓ Provide receipts (for **all** purchases made with the grant funding)
- ✓ Maintain the project deadline
- ✓ Contact the project coordinator for support or if I am unable to complete the project
- ✓ Allow for publication of my name, image and image of finished project
- ✓ Attend and present my project at a Celebration dinner (day/time provided by Grant Coordinator)

Applicant signature: _____

Print name (that would appear on a cheque): _____

Grant Coordinator Signature: _____

Date & time: _____

Bring your complete application form to the Tsartlip Health Centre.

Attention: Mary Hayes

Grant funding is made by possible by our sponsors:

