

If you wish to be considered as a potential MAC assessor, please fill in the form below. Please submit your current curriculum vitae or arts resume with this form.

REQUIRED FIELDS						
NAME:	Mr.	Mrs.	Ms.	Miss	Dr.	
Last name	First name		Middle name(s)			
ADDRESS:						
Apt No. – Street No. Street Name						
City	Province or Territory			Postal code		
Telephone (residence)			Telephone (business)			
Email			Website			
I AM AN ARTS PROFESSIONAL IN THE FOLLOWING DISCIPLINE(S):						
Dance	Music	Theatre	Literary Arts	Craft	Visual Arts	Media Arts
Arts Administrator		Other (please specify):				
AREA(S) OF SPECIALIZATION: (ex: composer, fibre art, playwright, choreographer, poetry, etc.)						
VOLUNTARY FIELDS						
<p>The Manitoba Arts Council is committed to supporting artistic practice that reflects the diversity of Manitoba's population. You are invited to complete the <u>voluntary self-identification portion</u> of the form. The voluntary information provided will help MAC ensure that programming serves all Manitobans. The information you provide will not be used in any way to determine your eligibility to apply to MAC granting programs.</p>						
Primary Language:						
English						
French						
Indigenous language (please specify):						
Other languages (please specify):						
Sign language (please specify):						
Do you speak, read, and/or understand:						
English:	Speak	Read	Understand			
French:	Speak	Read	Understand			
Other (please specify):						

Franco-Manitoban:

Check the box if you identify as Franco-Manitoban

Date of Birth:

Gender:

Female

Male

Transgender

Other (please specify):

Indigenous/First Peoples of Canada. Check a box if you identify as:

First Nations

Métis

Inuit

Ethno-Cultural Origin. Check a box if you identify as:

A person from African, Asian, Middle Eastern, Latin American or mixed racial heritage (please specify):

An Indigenous person from outside Canada (please specify):

Other (please specify):

Disability:

Check the box if you identify as a person with a disability (please specify):

REQUIRED FIELDS

I certify that the above information is true and complete, and I would like to be added to the Manitoba Arts Council's database of potential peer assessors.

Date

Signature

This information is being collected under the authority of the *Freedom of Information and Protection of Privacy Act (FIPPA)*, and will be used to assist staff of the Manitoba Arts Council in establishing a comprehensive list of potential assessors for future peer assessment committees. It is protected by the Protection of Privacy provisions of *The Freedom of Information and Protection of Privacy Act*. However, Manitoba Arts Council may exchange personal information provided herein by assessors in its assessor database with other provincial and national funding and assessment agencies, for the purpose of selecting assessors best able to respond to applications under consideration. Please indicate whether you agree to the sharing of the information provided above with other funding and assessment agencies. **YES** **NO**
If you have any questions about the collection, please contact the Manitoba Arts Council at info@artscouncil.mb.ca 204-945-2237 or 1-866-994-2787 (toll free).

Email assessors@artscouncil.mb.ca, Fax (204-945-5925), or mail originals to:
Manitoba Arts Council, 525 - 93 Lombard Avenue, Winnipeg, Manitoba, R3B 3B1