

This is the application form for offline submissions to the **Indigenous 360** grant. We strongly recommend that you have the Indigenous 360 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
  - Form B.1 for individuals
  - Form B.2 for groups
  - Form B.3 for organizations
- Section C – Project Information
  - Form C.1 for large -scale grants only
- Section D – Budget
  - Form D.1 for small-scale grants only
  - Form D.2 for large-scale grants only
- Section E – Support Material
- Section F – Collaborators (optional)
- Section G – Additional information (optional)
- Section H – Declaration
- Section I – 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 acknowledges that it carries out its work on the land of Indigenous nations throughout Manitoba. Our office is located on Treaty 1 territory, the ancestral lands of the Anishinaabe, Ininew, Cree, Oji-Cree, Dakota and Dene Peoples and the homeland of the Metis Nation.

### 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 <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

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

---

*For all applicant types*

---

#### **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.

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

---

#### *For individual applicants*

---

You are required to attach your resume/CV for review.

- ☐ 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): _____ |                                |                                     |  |

### 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

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

#### *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

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

\*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): _____ |                                |                                     |  |

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)

## Section C - Project Information [part 1/4]

*For all applicants*

Project title:	
Project start date:	Project end date:

**Grant type:**

- ☐ Small-scale – up to \$ 5,000  
☐ Large scale – up to \$ 15,000

Note: for micro-grants (\$1,000 and under), you must fill out a different application

**Check the artistic discipline(s) most relevant to this application:**

- |   |                                |                                     |  |
|---|--------------------------------|-------------------------------------|--|
| <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): _____ |                                |                                     |  |

**Specify the type of activity you will carry out in your project:**

This could include but is not limited to:

- Creating of new a project or working on a project you've already started;
- Developing Public presentations (productions, performances, exhibitions, concerts, readings;
- Developing community projects involving Indigenous artists - workshops, artistic collaborations, gathering events;
- Creating a publication Taking on training, apprenticeships, mentorship opportunities.

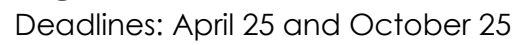
Type of activity within your project:
---------------------------------------

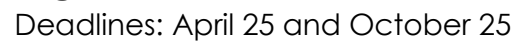
For all grant types

- What are you planning to do?
- What do you hope to achieve?
- How will this project impact your development or career as an artist?
- How will this project positively impact the Indigenous communities of Manitoba?
- Where will you present your work and who will be your main audience?

This image shows a single sheet 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.







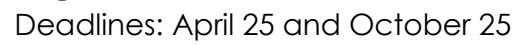
For all grant types

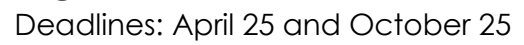
Word count: maximum of 250 words

[illegible]













### Section D.2 – Full Budget Form [part 1/1]

*For large-scale grants only*

Complete the budget form below. This standard budget form is used across most MAC grant applications and some sections may not apply to your project. Skip any fields that do not apply. Enter whole dollar amounts only; do not include cents. Include brief notes in the description fields for the costs you will be using your Manitoba Arts Council grant to cover.

MAC uses the following guidelines for determining expenses:

- Mileage: 45 cents per kilometer
- Living expenses: approximately \$2,500 per month, but may vary based on your situation
- Per diems: \$60 per day

Note: Total revenues must equal total expenses.

#### Total Budget

Total revenues: \_\_\_\_\_  
Total expenses: \_\_\_\_\_

#### Revenue: Grants

	Amount	Description
Manitoba Arts Council		
Canada Council for the Arts		
Other federal grants (specify)		
Other provincial grants (specify)		
Winnipeg Arts Council		
Other municipal arts council grants (specify)		
Other municipal grants (specify)		

#### Revenue: Tickets and Box office

# of presentations	Average % of venue sold out	Average venue capacity	Description
Projected audience:			
		Amount	Description
Average ticket price			
Total ticket or box office			

### Revenue: Sales

	Amount	Description
Sales and merchandise		
Other (specify)		

### Revenue: Fundraising

	Amount	Description
Sponsorship		
Donations		
Fundraising events		
Crowdsourcing		
Other (specify)		

### Revenue: Contributions

	Amount	Description
Financial contributions by the applicant		
Financial contributions by partners		
Other financial contributions (specify)		
In-kind contributions by the applicant		
In-kind contributions by partners		
Other In-kind contributions (specify)		

Total revenue :

### Expenses: Professional fees/honorariums

	Amount	Description
Artists (all disciplines)		
Designers, editors, and dramaturges		
Royalties and copyright		
Indigenous Knowledge Keepers		
Professional consultants and cross-sectoral collaborators		
Living expenses*		
Other (specify)		

\* approximately \$2,500 per month, but may vary based on your situation

### Expenses: Travel

	Amount	Description
Transportation (specify)		
Accommodations		
Per diem (\$60 per day)		
Other (specify)		

### Expenses: Production and publication costs

	Amount	Description
Materials (includes visual art materials, wardrobe, set, props)		
Technical personnel		
Equipment		
Rentals (venue, studio, equipment)		
Other (specify)		

### Expenses: Administration

	Amount	Description
Administrative personnel		
Shipping and extra baggage		
Printing		
Promotion		
Translation costs		
Workshops		
Other (specify)		

### Expenses: Research

	Amount	Description
Research		

### Expenses: Professional development

	Amount	Description
Professional development costs		

Total expenses
----------------

### Section E - Support Material Instruction

---

*For all grant types*

---

Support material should be samples of current work/activities relevant to your grant application; it may include the work/activities of other key artists or partners. You may choose to include earlier work/activities to provide a context for your application.

Support material may be submitted on a 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.

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 digital 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.

### Section E - Support Material [part 1/3]

*For all grant types*

Provide descriptions of the files, documents, (etc.) you are submitting as support material for this grant application.

In the note field, enter the following details about your support material:

- For images of visual art or craft: dimensions and medium
- For print: number of pages
- For audio/video: running time

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

	File name or link	Year produced	Title	Note
Item 1				

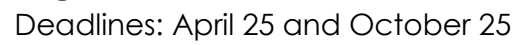
### Section E - Support Material [part 2/3]

*For all grant types*

	File name or link	Year produced	Title	Note
Item 2				

	File name or link	Year produced	Title	Note
Item 3				







### Section F. Collaborators [part 1/3; optional]

*For all grant types*

Who will be working with you on the project? Enter information for each collaborator in the form below.

Include bios for the key collaborators (Knowledge Keepers, artists, community organizations or mentors) as well as documents confirming their participation in your project such as:

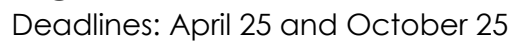
- confirmation letters or emails from any collaborators
- invitation/letters of support from any organizations, partners, or Indigenous communities you are working with

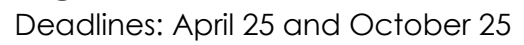
Note: You must submit the confirmation letters or emails you receive from your collaborator email to [helpdesk@artscouncil.mb.ca](mailto:helpdesk@artscouncil.mb.ca).

Be sure to include the name of each collaborator in the name of the file.

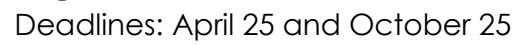
Collaborator: First name	Last name
Discipline	City/Town/Reserve
Collaborator: First name	Last name
Discipline	City/Town/Reserve
Collaborator: First name	Last name
Discipline	City/Town/Reserve
Collaborator: First name	Last name
Discipline	City/Town/Reserve
Collaborator: First name	Last name
Discipline	City/Town/Reserve
Collaborator: First name	Last name
Discipline	City/Town/Reserve











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

---

*For all applicant types*

---

#### 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.

---

**Signature**

---

**Date**

### Section I - Voluntary identification information

[part 1/3; optional]

---

*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*

---

#### **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