# Canada Council for the Arts logo John Hobday Awards in Arts Management

## Identification form

The information that you provide on the identification form will not be submitted to the assessment committee.

### Identification of applicant

Full legal name

Alias (if applicable)

Ms.  Mr.  Other Year of birth

Complete address

Primary Telephone Secondary Telephone

Email Website

I prefer to communicate with the Canada Council in:  English  French

### Identification of mentor (if applicable)

Full legal name

Alias (if applicable)

Ms.  Mr.  Other Year of birth

Complete address

Primary Telephone Secondary Telephone

Email Website

I prefer to communicate with the Canada Council in:  English  French

### Declaration of applicant

To be eligible, you must confirm your agreement with all of the following statements:

* I am a Canadian citizen or have permanent resident status, as defined by Immigration, Refugees and Citizenship Canada.
* I have carefully read the eligibility criteria for this prize, which are described in the application guidelines, and I meet these criteria.
* I understand that I am responsible for informing myself about and following any and all applicable ethical and legal responsibilities and/or appropriate protocols related to linguistic or cultural intellectual property.
* I commit to provide safe working conditions and to foster a workplace free from discrimination, harassment and sexual misconduct.
* I confirm that I (or my organization) abide(s) by all applicable municipal, provincial or territorial employment legislation, including, but not limited to that relating to employment standards, occupational health and safety, and human rights.
* I understand that I cannot receive prize money until all overdue final reports for Canada Council grants and prizes have been submitted and approved.
* I accept the conditions of this prize and agree to accept the Canada Council’s decision.

I am aware that the Canada Council is subject to the *[Access to Information](https://laws-lois.justice.gc.ca/eng/acts/A-1/index.html)* and [*Privacy Acts.*](https://laws-lois.justice.gc.ca/eng/acts/P-21/FullText.html)

**I confirm that:**

* I agree with the statements above.
* The statements in my application are complete and accurate, to the best of my knowledge.

Name Date

### Declaration of mentor (if applicable)

To be eligible, you must confirm your agreement with all of the following statements:

* I am a Canadian citizen or have permanent resident status, as defined by Immigration, Refugees and Citizenship Canada.
* I have carefully read the eligibility criteria for this prize, which are described in the application guidelines, and I meet these criteria.
* I understand that I am responsible for informing myself about and following any and all applicable ethical and legal responsibilities and/or appropriate protocols related to linguistic or cultural intellectual property.
* I commit to provide safe working conditions and to foster a workplace free from discrimination, harassment and sexual misconduct.
* I confirm that I (or my organization) abide(s) by all applicable municipal, provincial or territorial employment legislation, including, but not limited to that relating to employment standards, occupational health and safety, and human rights.
* I accept the conditions of this prize and agree to accept the Canada Council’s decision.
* I am aware that the Canada Council is subject to the [*Access to Information*](https://laws-lois.justice.gc.ca/eng/acts/A-1/index.html) and [*Privacy Acts*.](https://laws-lois.justice.gc.ca/eng/acts/P-21/FullText.html)

#### I confirm that:

* I agree with the statements above.
* The statements in my application are complete and accurate, to the best of my knowledge.

Name Date

### Access Support (if applicable)

Applicants who are Deaf, have disabilities or are living with mental illness may apply for additional funds to cover expenses for specific services and supports which are required to carry out the proposed eligible activities. Access support funds are separate from grant funds. Do not include the total amount requested above within your budget for the proposed activities.

#### Total access support amount requested

This amount must match the sum of the amounts requested in the description and cost breakdownbelow.

#### $

If successful, you might not be awarded the full amount requested.

#### Description and cost breakdown

Describe in detail the required services and supports and provide the cost breakdown. The description should include as much detail as possible and describe why the supports and/or services are required to carry out your activities. For example:

|  |  |
| --- | --- |
| Description | Cost breakdown |
| Workshop leaders will require sign language interpretation to communicate with me during the workshop. I will need to hire 2 interpreters for 3 hours at $80 per hour each | 3x $80 x 2 = $480 |
| Travel expenses from Montreal – Ottawa for sign language interpreters  (2 bus tickets at $75 each) | $75 x 2 = $150 |
| Total request | **$630** |

Personal information collected on this form will be stored in the Personal Information Bank for the appropriate program CC ART 202. Protected when completed.

## Required documents and support material

### Required documents

#### Note: The Canada Council will not return the documents to you.

#### Detailed project description (1500 words maximum)

Clearly describe your proposed project and its potential impact on your career, addressing:

* the reasons why you are applying for this award
* the suitability of the program or mentor: explain why you chose this program or mentor
* the project’s potential to empower you as an arts manager
* how the experience will address challenges and help to improve and strengthen your management capacity
* the anticipated impact that the experience will have on your opportunities for advancement OR the potential impact of the project on your career
* the long-term benefits to the arts in general

the potential of this project to contribute to the renewal and support of the arts towards a more equitable, diverse, and inclusive society.

If your proposed activity touches on Indigenous traditional knowledge, linguistic or cultural intellectual property please describe your relationship to this content and how appropriate protocols were observed or addressed.

**In the case of a mentorship, the project description must be signed by you and your mentor**. You must also include:

* the access you will have to the mentor and to decision-makers
* the contribution that the project would make to the transfer of knowledge, and development of the next generation of arts managers

#### A biography (1 page maximum)

#### Your current professional curriculum vitae (10 pages maximum)

* emphasize your achievements in the arts management field
* your curriculum vitae must demonstrate a minimum of 10 years’ experience as a professional arts manager

#### Your mentor’s current curriculum vitae (if applicable, 10 pages maximum)

#### Profile and mandate (1 page each maximum)

* of the arts organization that currently employs you, and of your mentor’s organization (if applicable)

#### Detailed budget or financial analysis

* showing the anticipated expenses for the project

#### Schedule or time frame for the project

#### An official letter

* Professional Development and Renewal
  + confirming your acceptance into the program and/or a copy of the official registration documents from the institution or organization that will be providing the program of study.
* Mentorship
  + from your organization confirming you will be granted release time for the duration of the mentorship
  + from the mentor’s organization confirming permission for the mentor to take the time away, and that the mentee will have access to the premises for the duration of the project.

#### Letters of support (3 maximum)

from 3 different arts organizations or arts managers

#### Instructions

* Text files must be in .pdf, .doc or .docx, .txt or .rtf format.
* Do not use punctuation, spaces, special characters, or more than 45 characters in your file names.
* We do not accept compressed files such as .zip, .rar, .7zip, htm, or .html, executable files such as .exe, .com etc., or file sharing services such as Google Drive, WeTransfer, or Dropbox.



# John Hobday Awards in Arts Management

## Application form

The information that you provide in this form will be submitted to the peer assessment committee.

### Identification of applicant

Full name

City and province / territory

Year you began your career in the arts or in arts management

### Identification of mentor (if applicable)

Full name

City and province / territory

### Category

Choose only one:  Professional Development and Renewal  Mentorship

Period to be covered by this award:

From (day/month/year) to (day/month/year)

### Brief project description (15 words maximum)

## Checklist

Use this checklist to confirm that you have completed all relevant sections of the form and have included all required support material.

You must include the following items in the order shown below.

#### Identification form (confidential)

* Declaration of applicant
* Declaration of mentor (if applicable)

#### Application form

#### Required documents

* Detailed project description (1500 words maximum)
  + signed by you and your mentor, if applicable
* A biography (1 page maximum)
* Your current professional curriculum vitae (10 pages maximum)
* Profile and mandate of your organization (1 page maximum)
* Detailed budget or financial analysis
* Schedule or time frame for the project
* Letters of support (3 maximum)

#### Additional required documents for Professional Development and Renewal

* An official letter confirming your acceptance and/or a copy of the official registration documents

#### Additional required documents for Mentorship

* Your mentor’s current curriculum vitae (10 pages maximum)
* Profile and mandate of your mentor’s organization (1 page maximum)
* An official letter
  + from your organization confirming you will be granted release time for the duration of the mentorship
  + from the mentor’s organization confirming permission for the mentor to take the time away, and that the mentee will have access to the premises

Send your completed applicationform and required documents **as 1 email** **with attachments** to [johnhobday-prizes@canadacouncil.ca](mailto:johnhobday-prizes@canadacouncil.ca) on or before the deadline by 11:59 pm (local time).

* The maximum file size including attachments is 25 MB.
* ZIP files are not accepted. They will block your email from being received by our server.
* We do not accept file sharing links to Google Drive, WeTransfer, or Dropbox

If you do not receive a confirmation email within 3 business days, please contact us.

Incomplete or late applications will not be assessed.

*PROTECTED B (when completed) PIB CC PPU 020*



Self-Identification (optional)

The Canada Council encourages you to complete this voluntary self-identification form to help determine whether our programs and services are reaching a diverse range of Canadian artists. The Canada Council aims to support a vital and diverse arts ecology that enriches the lives of Canadians, and equity is a critical means to achieve this. All citizens deserve to benefit from a vibrant, accessible and pluralistic arts sector, in which all creative expressions have the same chance to flourish.

Anyone applying to the Canada Council, participating on a peer assessment committee, being nominated or accepting a prize is invited to complete this form. Completion of this form is entirely voluntary. The information that you provide will not be used to assess your application.

The Canada Council may use the information collected to increase equity of access to grants and other opportunities, and to ensure that these opportunities reach groups which represent Canada’s diverse artistic community. This information may also be used to evaluate the outreach efforts of the Canada Council and for other research purposes.

* Please complete this revised form even if you have provided self-ID information in the past.
* **Please do not complete this form if you are already registered with the Canada Council Portal.**   
  In that case, you have already had the opportunity to answer our questions.

Name

**Year of birth**

We use this information to better understand generational representation within our programs.

Place of birth, citizenship, and immigration

We use this information to better understand the geographical diversity within our programs.

**Place of birth**

Canada  Outside Canada

If you were not born in Canada, please specify your country of birth

**Home**

“Home” refers to a place where you have roots, knowledge, and connection.

Home province/territory/state or other region

City, town, hamlet, First Nation or Inuit community, Métis Settlement or other place

**Citizenship and immigration status**

Please select your status as defined by [Immigration, Refugees and Citizenship Canada](https://www.canada.ca/en/immigration-refugees-citizenship.html)

Canadian citizen  Permanent resident  Non-resident

If you were not born in Canada, please indicate the year you first arrived in Canada

Gender

This information is used to inform our understanding of the experiences of applicants and peers from gender diverse communities with our programs.

Please select all that apply:

Trans  Woman  Man  Non-binary  Two-spirit

Genderqueer  Agender  Or, please specify

Sexual orientation

We use this information to better understand sexual diversity within our programs.

Please select all that apply:

Heterosexual  Two-spirit  Lesbian  Gay  Bisexual

Pansexual  Queer  Questioning  Asexual  Or, please specify

Linguistic diversity

We use this information to better understand linguistic diversity within our programs.

**First language**

**Official-language minority communities**

Official language minority communities are groups of people whose first language or chosen official language is not the majority language in their province or territory—in other words, Anglophones in Quebec and Francophones outside of Quebec.

Select the option below if you identify as a member of an official language minority community

Anglophone official-language minority (e.g., English speaker in Quebec)

Francophone official-language minority (e.g., French speaker outside Quebec.)

**Languages**

Select all the language(s) you have learned and still understand:

English  French

anishinaabemowin / Ojibwe    anishininiimowin / Oji-Cree    Dene

Innu-aimun    Inuktitut  Nêhiyawêwin / Cree

Other Indigenous languages, (please specify):

Arabic  Cantonese  Punjabi (Panjabi)    Mandarin

Spanish  Tagalog (Pilipino, Filipino)

Other languages (please specify)

ASL (American Sign Language)  ISL (Indigenous Sign Languages)

LSQ (Langue des signes québécoise)

Other sign languages (please specify)

Deaf and disability

We use this information to better understand the participation of people who are Deaf and/or have disabilities in our programs.

Please indicate if you identify as a person who:

is Deaf, partially deaf, hard of hearing

has a disability (e.g., blindness, visual impairment, physical impairment, reduced mobility, learning disability, intellectual impairment, living with a mental or chronic illness)

First Nations, Inuit and Métis

We use this information to better understand the participation of Indigenous Peoples in our programs.

The Council supports Indigenous arts and cultures in the spirit of self-determination and is opposed to appropriation. This means that the cultural and artistic practices of Indigenous Peoples must remain in the control of their communities.

Please indicate if you identify as belonging to one of the following Indigenous Peoples in Canada:

First Nations  Inuit  Métis

First Nations, Inuit and Métis persons may also describe their Indigenous identity in their own words:

In the next section, you can also describe your racial and ethnic identity or select any other identities that apply.

Racial and ethnic identity

We use this information to better understand racial and ethnic diversity within our programs.

Please describe your racial and ethnic identity in your own words.

To help us compare applicant and peer assessor demographics with the general population, please select all that apply:

Black, Caribbean (e.g., Jamaican, Haitian, Trinidadian/Tobagonian)

Black, African (e.g., Nigerian, Ethiopian, Congolese)

Black, not listed above

North African (e.g., Egyptian, Moroccan, Algerian)

South Asian (e.g., Indian, Pakistani, Sri Lankan, Indo-Caribbean)

East Asian (e.g., Chinese, Korean, Japanese, Taiwanese)

Southeast Asian (e.g., Filipinx, Vietnamese, Cambodian)

Pacific Islander (e.g., Samoan, Fijian, Native Hawaiian)

West or Central Asian (e.g., Iranian, Lebanese, Afghan)

Latin American or Latinx (e.g., Colombian, Salvadoran, Peruvian)

Indigenous outside of Canada (e.g., Māori, Sámi, Maasai, Maya)

Mixed race or ethnicity, including one or more of the identities listed above

White (e.g., English, French, Swedish)

Another racial or ethnic identity

Agreement to provide personal information

**Consent to share information**

Select **one** of the options below:

I consent to have the Canada Council for the Arts share my information with other Canadian government departments, organizations and contractors with whom the Council has a data sharing agreement.

I do not consent to have the Canada Council for the Arts share my information with other Canadian government departments, organizations and contractors with whom the Council has a data sharing agreement.

**I confirm that I agree to the following:**

I have provided the personal information in this form with the understanding that it will be used only for the purposes stated in this form and in the [Canada Council's Privacy Notice.](http://canadacouncil.ca/about/public-accountability/privacy-notice)

The information I have provided is accurate and complete.

Name Date

Contact information

You can request access to your information or to have corrections made to your information by contacting the ATIP coordinator:

Access to Information and Privacy (ATIP) Coordinator

Canada Council for the Arts  
150 Elgin Street, P.O. Box 1047  
Ottawa ON K1P 5V8

[atip-aiprp@canadacouncil.ca](mailto:atip-aiprp@canadacouncil.ca) | 1-800-263-5588 or 613-566-4414, ext. 4015

For people who are Deaf, hard of hearing or TTY users, please use your preferred MRS (Message Relay Service) or IP (Internet Protocol) service to contact us.

The Canada Council also welcomes VRS (Video Relay Service) calls. For more information, please visit the [VRS Canada website (http://srvcanadavrs.ca/en/)](http://srvcanadavrs.ca/en/)

Personal information is stored in a series of Canada Council data banks described in *Info Source*.