

LEAP
(Learning Elders Arts Program)
Linking Island Seniors and Island Artists
APPLICATION 2009/2010



PROJECT TITLE: _____

1. ORGANIZATION INFORMATION

Name of Organization: _____

Mailing Address: _____

_____ **Postal Code** _____

Telephone: _____ **e-mail:** _____

Fax: _____ **Website:** _____

Please attach a list of current Board of Directors, Executive Committee Members, Managers and/or Owners to this application.

2. ORGANIZATION CONTACTS

Contact Person and Position (1): _____

Telephone: _____ **e-mail:** _____

Contact Person and Position (2): _____

Telephone: _____ **e-mail:** _____

Two contacts are required and both must be members of the organization.

3. ORGANIZATION GENERAL INFORMATION

Brief Description of Organization: _____

Include date organization was established, mandate and general activities of organization. If necessary, attach another sheet.

9. ARTIST(S) CONTACT INFORMATION

Artist (1): _____

Mailing Address: _____

Postal Code _____

Telephone: _____ e-mail: _____

Artist (2): _____

Mailing Address: _____

Postal Code _____

Telephone: _____ e-mail: _____

10. PROJECT BUDGET

This section should be completed in collaboration with the artist(s). (If the project involves more than one artist, please include a separate budget for each artist.)

ARTIST COSTS

Planning Sessions: _____ hours @ \$30 per hour \$

Art Sessions: _____ hours @ \$40 per hour \$

Preparation Sessions: _____ hours @ \$30 per hour \$

Travel: _____ kms X .35 \$

Other (describe): \$

MATERIALS

Materials (list)

TOTAL PROJECT BUDGET \$

11. PROJECT PROMOTION

Announcement of the project will be publicized by the following medias (please mark all applicable):

- Voice for Island Seniors** **Eastern Graphic** **Guardian** **West Prince Graphic**
- The Northern Star** **La Voix Acadienne** **Journal Pioneer** **Posters**
- Community Newsletter** **Church Bulletins** **Cable TV** **Other** _____

Approved projects must submit copies of advertisements, public service announcements, articles and other informational and promotional publicity to the PEI Senior Citizens' Federation with the LEAP final report.

All press releases, interviews, public service announcements and other publicity regarding LEAP programs credit must be given to the PEI Department of Communities, Cultural Affairs, and Labour for funding the project and the PEI Senior Citizens' Federation Inc. for administering it.

Public Service Announcements for all projects must be submitted to the PEI Senior Citizens' Federation for publication in the "Voice for Island Seniors".

12. DECLARATION

Legal Name of Organization _____

We, the undersigned, declare that we are authorized representatives having legal and/or financial signing authority for the above organization.

We certify the information contained in this application and supporting documents is true and accurate and endorsed by the above organization.

We understand that the LEAP Program is under no obligation to fund this application and may not fund this application for the full amount requested.

If approved for funding, we agree to carry out the project as it is described in the attached application and to abide by program guidelines.

We will recognize the contribution of the PEI Department of Communities, Cultural Affairs and Labour and the PEI Senior Citizens' Federation Inc. to this initiative in any and all press releases, interviews, public service announcements, advertisements and other publicity regarding LEAP programs.

Print Name of Board Officer/Agent

Print Name of Project Director

Board Officer/Agent signature

Project Director signature

Board Officer/Agent title

Title

Date

Date

Telephone Number

Telephone Number

Two signatures are required. One signer must be a member of the organization's Board of Directors, Executive Committee or a Manager or Owner (who is legally authorized to enter into binding contracts on behalf of the organization). The second signature is the Project Director. This individual must be a member or employee of the organization and must be listed as one of the two contact persons in section two of this application.

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PROJECT APPLICATION CHECKLIST



THIS CHECKLIST IS A REQUIRED PART OF THE APPLICATION.

- Original signed copy of the LEAP Application Form.
- A list of current Board of Directors, Executive Committee Members, Managers and/or Owners.
- Artist's resume(s).
- Four (4) photocopies of the completed signed LEAP Application Form and all attachments.
- Application Checklist.

Please keep a copy of this grant application for your reference.

The completed applications and supporting documents must be delivered to the PEI Senior Citizens' Federation Inc. office by the close of business (5 pm) October 15th. Extended deadlines will not be permitted. Applications must be delivered/mailed to:

Linda Jean Nicholson
PEI Senior Citizens' Federation Inc.
40 Enman Crescent, Suite 117
Charlottetown, PE C1E 1E6

e-mail: peiscf@pei.aibn.com
Tel.: 902-368-9008
Toll free 1-800-368-9008
Fax: 902-368-9006

Deadline for submission of applications: October 15, 2009.



The LEAP Program is funded by the PEI Department of Communities, Cultural Affairs, and Labour under the direction of Minister Carolyn Bertram and administered by the PEI Senior Citizens' Federation Inc.

