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ADA Community Workshop Proposal

- 1 Coordinator Information
 - 2 Workshop Information
 - 3 Workshop Description
 - 4 Budget Revenue Sheet
 - 5 Budget Expense Sheet
 - 6 Consent and Submit
-

Tips for using this form:

We recommend that you copy and paste your proposal text into this form from a document saved on your computer, to prevent any loss of your work should your computer or browser experience an error.

Use only the 'Next' and 'Previous' buttons at the bottom of each page of this proposal form, and not your browser's 'Back' and 'Forward' buttons. Using your browser's buttons can result in a loss of the data you've entered.

If you need to leave the form for any period of time or want to give yourself peace-of-mind, please use the 'Save and Continue Later' link at the bottom to save your progress. You will be taken to a new page with a link back to your saved form, email or copy and paste this link to save it for returning to your application.

Season *

Coordinator Name *

First

Last

Coordinator Organization

If applicable.

Phone *

Email *

Mailing Address *

Street Address

Address Line 2

City

Province

Postal Code

Successful proposals will have a support cheque delivered to this mailing address.

Payable Name *

Successful proposals will have a support cheque made out in this name.

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Workshop Title *

Genre/Type of Workshop *

Workshop Venue Name *

Workshop Venue Address *

Street Address

City

Date(s) and Time(s) of Workshop Session(s) *

Date

Start Time

End Time



Click the '+' icon at the end of a row to add dates/times.

Based on the season you selected, your Summer Workshop dates must start between July and August.

Previous

Next

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Acknowledgment of Traditional Territories

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Who are the workshop educators(s) and where are they coming from? *

Name	From
<input type="text"/>	<input type="text"/> ⊕

Click the '+' icon at the end of a row to add additional educators. Educators must be hired under contract as recognized professionals in their field.

Educator Resume(s) and Bio(s) *

- Submitted as Attachments
- Submitted as Text

A complete resume and bio for each educator must accompany this application for it to be considered complete.

Attachments *

Drop files here or

Select files

What is the workshop's (1) specific focus, its (2) purpose/objectives and (3) why it is needed? *

0 of 1500 max characters

Which sector(s) will this workshop serve? *

Amateur/Student

Professional

Recreational

Describe how this workshop serves its target community and the broader community. *

0 of 500 max characters

What age level(s) will this workshop serve? *

0 of 100 max characters

Describe the marketing strategy for this workshop. *

0 of 500 max characters

What method(s) will you use to evaluate and report upon the success/outcomes of this workshop? *

0 of 500 max characters

List any staff/volunteers by name and position. *

0 of 300 max characters

Additional comments.

0 of 300 max characters

If you have anything to add about your workshop that was not possible to express elsewhere, please do so here.

Previous

Next

[Save and Continue Later](#)

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[Register](#)

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Budget Revenue Sheet

1. Expected Participant Revenue *

Participants (#)	Fee (\$)	Total (\$)
<input type="text"/>	<input type="text"/>	<input type="text" value=""/>

Please list the number of participants you expect at each of your fee price-points and the total revenue for each fee (# of Participants x Fee (\$)). E.g. 10 participants paying a fee of \$20/participant to participate will generate \$200 in revenue. Click the '+' icon at the end of a row to add additional rates.

Revenue 1. Subtotal *

Please enter a number greater than or equal to 0.

Enter your Expected Participant Revenue Subtotal.

2. Grant(s) Revenue

Funding Body	Grant Name	Total (\$)
--------------	------------	------------

			⊕
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Please list any grants (not ADA Community Workshop funding) you have applied for and the expected revenue from them. Click the '+' icon at the end of a row to add additional grants.

Revenue 2. Subtotal *

\$0.00

Please enter a number greater than or equal to 0.

Enter your Grant(s) Revenue Subtotal.

3. Fundraising/Donations/Other Revenue

Type	Description	Total (\$)	
			⊕

Please list and describe all other expected revenue types including any fundraising, donations (cash or in-kind), or other revenues. Click the '+' icon at the end of the row above to add additional revenue lines.

Revenue 3. Subtotal *

\$0.00

Please enter a number greater than or equal to 0.

Enter your Fundraising/Donations/Other Revenue subtotal.

4. ADA Community Workshop Contribution (\$) *

--

Please enter a number from 0 to 700.

How much support from ADA is required to realize this workshop?

Revenue Total *

\$ 0.00 CAD

Total expected revenue, calculated from your revenue subtotals above.

Previous

Next

[Save and Continue Later](#)

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Expense Summary

Note: cannot include social expenses (e.g. parties, decorations, meals, catering, or alcoholic drinks).

1. Instructional Rate(s) Expenses *

Educator Name	Rate Type	Rate (\$)
<input type="text"/>	<input type="text"/>	<input type="text"/> 

Instructional rate paid to the educator(s) contracted for this workshop. Click the '+' icon at the of a row to add additional educators or rate types (e.g. one rate for a masterclass technique session and a different rate for a panel discussion).

Expenses 1. Subtotal *

Please enter a number greater than or equal to 0.

Enter your Instructional Rate(s) Expenses Subtotal.

2. Travel/Accommodation Expenses

Description	Total (\$)
-------------	------------



E.g. flight, bus, taxi, fuel, parking, hotel, etc. expenses. Click the '+' icon at the end of a row to add additional travel or accommodation expenses.

Expenses 2. Subtotal *

Please enter a number greater than or equal to 0.

Enter your Travel/Accommodation Expenses Subtotal.

3. Instructional Materials Expenses

Description

Total (\$)



Click the '+' icon at the end of any row to add additional materials expenses.

Expenses 3. Subtotal *

Please enter a number greater than or equal to 0.

Enter your Instructional Materials Expenses Subtotal.

4. Advertising and Printing Expenses

Description

Total (\$)



Click the '+' icon at the end of a row to add additional advertising and printing expenses.

Expenses 4. Subtotal *

Please enter a number greater than or equal to 0.

Enter your Advertising and Printing Expenses Subtotal.

5. Venue Expenses

Description

Total (\$)



Click the '+' icon at the end of a row to add additional venue expenses.

Expenses 5. Subtotal *

\$0.00

Please enter a number greater than or equal to 0.

Enter your Venue Expenses Subtotal.

6. Administrative Expenses

Description

Total (\$)



Click the '+' icon at the end of a row to add additional administrative expenses.

Expenses 6. Subtotal *

\$0.00

Please enter a number greater than or equal to 0.

Enter your Administrative Expenses Subtotal.

7. Other Expenses

Description

Total (\$)



Click the '+' icon at the end of a row to add additional expenses.

Expenses 7. Subtotal *

\$0.00

Please enter a number greater than or equal to 0.

Enter your Other Expenses Subtotal.

Expense Total (\$) *

\$ 0.00 CAD

Total expected expenses, calculated from your expense subtotals above.

Total Profit/Loss *

\$ 4.00 CAD

Calculated from your revenue and expense total calculations. Note: Try your best to balance your budget. Proposals with budgets that do not balance (i.e. if this field is not \$0.00) will score lower than proposals with budgets that do balance.

Previous

Next

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Consent *

I have read and agree to the Community Workshop Grant policy.

I am the named Workshop Coordinator (Applicant). I have reviewed my proposal and, to the best of my knowledge and belief, the information contained herein is true and correct as of the time of submission.

Previous

Submit Proposal

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