

Arts Opportunities Fund

Student Application Form

Application Guidelines:

- Applicant must be a full-time student in the Faculty of Arts
- The Arts Opportunities Fund does not fund individual student activities, honorariums, and/or student salaries
- Only University recognized groups are eligible
- Priority will be given to projects hosted within the Faculty of Arts, either in-person or online at McGill or in Montreal, Québec.
- Any project that involves another McGill Faculty must show evidence that support is being received from that Faculty (this information must be included in the budget section of the application)
- Applicants should ideally have some other sources of support (as applications without matching funding from other sources may be unsuccessful)
- The Department Chair in your department must approve the application. Applications missing this approval will not be considered
- Please ensure all fields are filled in
- Applications submitted past the deadline will not be considered
- Awards range from \$100-\$2,000
- Send the completed form to aof@mcgill.ca
- All information should be in the application form. No other attachments accompanying the form will be accepted.

APPLICANT INFORMATION

Student Name:

Faculty and Department/Unit:

McGill Email:

Name of Organization (if applying on behalf of student organization) and Affiliated Department:

Organization Email (if applicable):

PROJECT INFORMATION

Project or Event Title:

Start Date:

End Date:

Funding Amount Requested:

(Note: AOF awards for student applications are usually \$100-\$2,000)

Has this event or initiative received AOF or DADF (Dean of Arts Development Fund) funding in the past?

Yes No

If 'Yes', how much and when was the last time funding was received?

Description: Provide a brief description of the project or event. The objectives of the project or event should be stated clearly. Include information such as the names of guest speakers, the units and departments involved, the number of participants or attendees expected, etc. The more details you can provide the stronger your application will be. Limit description to 500 words maximum.

PROJECT BUDGET

The AOF does not fund individual student activities, honorariums, and/or student salaries

Please use the table below to indicate your proposed budget and the sources of funding for your expenses. Indicate both how AOF funds will be spent and other sources of funding for additional expenditures. That is, if you will apply for or are receiving other sources of funding, e.g., from your Department or School, from student associations, etc. specify what those funding sources will be used for.

	Amount	Explanation
Revenue		
AOF funding requested		
Other funding: <i>list each source separately in the lines below. Include sources that are not yet confirmed – e.g., if you applied to AUS and are waiting to hear back.</i>		Explain how each funding source will be used (e.g., <i>this funding was given to cover catering</i>)
Total Revenue		
Expenditures		
Honoraria		Must be funded by other sources
Catering/Receptions/Meals		
Room Rental		
Travel		e.g., guest speaker airfare, hotel, etc.
Advertising/Publicity		
Printing		
Website expenses		
Materials and Supplies		
Other (specify)		
Other (specify)		
Other (specify)		
Total Expenditures		
Balance		

PAYMENT INFORMATION

Funding may be disbursed to your Department/Unit (if a professor or your department is assisting you with this event) or to a student organization. If requesting funds to be sent to the Department/Unit, ensure you have spoken with your Department Chair/Unit Director and have obtained a FOAPAL. If requesting funds to be sent to a student organization, ensure the organization is able to receive direct deposit or cash cheques, i.e., that it has a valid bank account at the organization's address. Funding will not be disbursed to an individual or personal addresses.

FOAPAL:

OR

Cheque Payable To & Address:

APPROVAL:

All projects must be approved by your Department/School/Unit Chair/Director. If the project is affiliated with a unit other than your own Department/Unit, the form may be signed by the Chair/Director of the affiliated unit.

Department Chair/Unit Director Name:

Chair/Director Signature:

Date: