CANB Grant Program

Training and Professional Development

2020 - 2021

# Application Form

**1.0 General Information**

|  |  |
| --- | --- |
| Name of Organization |  |
| Project Head |  |
| Phone # |  |
| Email Address |  |
| Civic Address |  |
| Website |  |

1.1 Is the Mission Statement / Mandate of your institution on file with CANB?

* Yes
* No

1.2 Was this application reviewed by or discussed with the Archives Advisor?

* Yes
* No

NOTE: This application is divided into two (2) sections. Section 2.0 is to be filled out if your organization wishes to send someone (staff and/or volunteer(s)) to a training opportunity being hosted by a different institution. Section 3.0 is to be filled out if your organization wishes to have someone come to the organization and give training to staff/volunteers.

**2.0 Outside Training / Professional Development**

(To be filled out if your organization wishes to ***send*** staff/and or volunteer(s) to a training opportunity not hosted by your organization)

2.1 Training Proposal

|  |  |
| --- | --- |
| Training Title |  |
| Dates of Training / Professional Development |  |
| Training provider (Please provide name of host institution, educator, and host institution’s address) |  |

2.2 Please provide a link to the training opportunity’s website.

2.3 Describe the training.

* What is the purpose of the training?
* How will this training be used to benefit your institution?
* Why was this training opportunity selected over other opportunities?

2.4 Budget

|  |  |  |
| --- | --- | --- |
| 1 | Cost of registration  |  |
| **Total Amount Requested from CANB** |  |
| **BALANCE TO BE COVERED BY YOUR INSTITUTION** |  |

**3.0 Hosting Training / Professional Development**

(To be filled out if your organization wants to have someone ***come*** to your institution and provide training to your staff and/or volunteer(s))

Note: The aims of CANB are to make training and professional development opportunities available to the widest audience possible. If the opportunity would be of use to a larger audience the Adjudication Committee may recommend the training for all members.

3.1 Training Proposal

|  |  |
| --- | --- |
| Training Title |  |
| Proposed Start Date |  |
| Proposed Completion Date |  |
| Training Provider |  |

3.2 Describe the training

* What is the purpose of the training?
* Who is the target audience of this training and professional development project? (Staff, volunteers, both)
* How will the training benefit your institution?
* Who are your partner(s)? (If applicable)
* Who will be providing the training and what their qualifications to provide the training?

3.3 Budget

|  |  |  |
| --- | --- | --- |
| 1 | Instructor’s Fee |  |
| 2 | In Kind expenses from your organization (i.e. planning the training / professional development, assistance provided by volunteers, other equipment or supplies already paid for by the applicant) |  |
| **Total Amount for Training** (Add Lines 1, and 2 together) |  |
| **Total Amount Requested from CANB** |  |
| **Balance to be covered by Organization** |  |

**4.0** **Other Notes**

4.1 Is there anything else your institution wishes the Adjudication Committee to know about regarding this application?