

**PROFESSIONAL AND ORGANIZATIONAL DEVELOPMENT IN MUSEOLOGY PROGRAM**

<input type="checkbox"/> <u>Part 1: Professional Development</u>		<input type="checkbox"/> <u>Part 2: Organizational Development</u>	
Grant requested	\$	<b>For Office Use Only</b> Grant approved	\$

**1. APPLICANT INFORMATION**

Legal Name of Organization			
Address (Org.)			
City or Town		Postal Code	
Contact person		Telephone (org.)	
E-mail (Org.)			

**2. PROJECT DESCRIPTION**

Please **attach all documents** which describe the proposed workshop, seminar or conference, the scheduled dates, the name of the facilitator, trainer, or speaker(s), and the location or format and list of participants from your organization or museum zone.

Please provide details regarding how this proposed training is necessary for your organization and its staff, board, or volunteers in relation to your strategic plan.

Indicate how it will improve the effectiveness and enhance the professional and/or organizational skills of those who participate, and how the knowledge gained will be transferred to others in the organization (board, staff, volunteers, etc.). What are the objectives of this activity and how will success be measured?

**3. PROJECT BUDGET**

<b>Expenditures</b>	
Registration or professional fees:	
Accommodation (the grant will cover a maximum of \$125 per person per night):	
Travel (see note below):	
Other (specify):	
Other (specify):	
<b>Total expenditures:</b>	
<b>Revenues</b>	
Government contributions:	
Provincial government (Professional and Organizational Development):	
Other (specify):	
Other sources of revenue:	
Financial contribution of applicant organization:	
Other (specify):	
<b>Total revenues:</b>	

Travel and Meals: Travel may include airfare, public transportation, or mileage. Mileage must be calculated based on the most current provincial government rates. If applicable, coverage for meals must not exceed provincial government per diem guidelines.

For the current fiscal year, the financial contribution may attain 100% of eligible costs, to a maximum of \$1,000 per institution. **Please keep all receipts in case we ask to see them.**

Depending on the number of applications, more than one request per institution per year may be considered, but the total amount cannot exceed the maximum per fiscal year.

#### 4. DECLARATION OF APPLICANT

I hereby agree to provide all requested information as well as any other supporting documents needed to evaluate this application. I understand that my application may be disqualified if it is incomplete, and that projects or parts of projects started or completed before application is received will not be funded retroactively.

I recognize that applications are approved subject to availability of funds, and beyond the provision of a grant, the Government of New Brunswick has no further commitment to the applicant. The Government will not be held responsible for the completion of an activity.

I understand that the funds must be used as specified in the application and approved project, and that I will reimburse the funds in the case of a cancelled project. I agree that a final report will be submitted to the Department no later than 30 days after completion of the activity.

I agree to acknowledge the financial contribution of the Government of New Brunswick in all publicity related to the activities of the proposed project, if applicable.

I certify that this organization is based in New Brunswick, that I have signing authority for the above-named organization, and that, to the best of my knowledge, the information provided with this application is accurate.

_____ Name	_____ Title
_____ Signature	_____ Date

**Note:** The Department may revise Program guidelines or suspend the program without notice if required funds are not available. Meeting the eligibility criteria does not guarantee that a grant will be awarded. Because of the high number of applications that may be received and the limited resources available, grants awarded may be smaller than the amounts requested.

In the case of disagreement concerning the interpretation of its policies funding programs and their respective components, the Department reserves the right to final interpretation of the intent and implementation of the program.

**This completed signed application and all required supporting material must be sent electronically to: [archaeology-heritage@gnb.ca](mailto:archaeology-heritage@gnb.ca)**

#### **APPLICANT'S CHECK-LIST**

- ☐ Resume or bio of the trainer(s) or organization offering the training
- ☐ Detailed information about the proposed training and objectives of the activity, including date(s)
- ☐ List of the person(s) participating in the session
- ☐ Evaluation measures and/or products planned for the session (i.e. strategic plan, revised policies, etc.)
- ☐ Board authorization (minutes, extract from meeting) indicating that funds will be spent as outlined in the application.

**Archaeology and Heritage Branch**  
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