



Applicant Organization Name: _____

Contact Name: _____

Contact Position: _____

Contact Email: _____

Contact Telephone: _____

Project Title: _____

Project Budget: _____

Amount requested from Sector Development Support:

Provide a one-sentence summary of your project.

Example: "To offer an export mission to mid-career producers from day/month to day/month."

Is your organization majority governed and led (and owned, if applicable) by members from one or more Racialized or Indigenous community? Please select all that apply:

- First Nations
- Métis
- Inuit
- Black
- Other Racialized communities, please specify:
 - Latin Americans (Latino, Latina, Latinx);
 - Middle-Easterns and North Africans;
 - South Asians;
 - Southeast Asians;
 - East Asians;

- Indigenous people from outside of Canada (from Oceania, United States, Northern Europe and Pacific Islands);
- Multiracial (a combination of any of the above categories or any of the above categories with Caucasian or European ancestry).
- None

Is your organization majority governed and led (and owned, if applicable) by members from one any of these equity- seeking communities? Please select all that apply:

- Women
- LGBTQ2+ or Non-Binary People
- Disabled
- None

Is your organization majority governed and led (and owned, if applicable) by members of a Regional community?

- Please specify where your organization is located (municipality or city, province, or territory):

- None

What type of content is your organization’s project focused on:

- Convergent (Television)
- Experimental (Interactive or Immersive Digital Media)
- Both

Project Timeline:

Proposed Start Date: _____

Proposed End Date: _____

What language(s) is your project offered in?

- English
- French
- Both
- Other, please specify: _____

Reach:

- Municipal, please specify: _____
- Regional, please specify: _____
- Provincial, please specify: _____
- National

I certify that all the information provided is accurate and complete and that there is no omission of important information.

Signature: _____
I am duly authorized

Name: _____
(Please print)

Titre: _____

Date: _____
YYYY / MM / DD

**PLEASE USE A SEPARATE DOCUMENT TO ANSWER THE QUESTIONS LISTED BELOW AND
ATTACH IT IN A PDF FORMAT WITH YOUR APPLICATION.**

**Note: Please follow the word limit requirements. Failure to do so may prevent an
application from being eligible.**

Project: Describe your proposed project, its key objectives, core activities and its history to date. (max 1,000 words)

Project Alignment: Please describe how your project will meet the strategic objectives of this fund. (max 700 words)

Profile of Organization: Please provide a brief summary of your organization's focus or mandate. (max 500 words)

Profile of Organization's Principal/Lead: Please provide a brief summary of the experience of the organization's principal/lead. (max 300 words)

Timeline: Please provide an overview of the project timeline and any key dates/milestones:

Need: Describe the need your project will be addressing (you may refer to relevant reports, studies, needs analysis, survey results, etc.). (max 500 words)

Audience: Describe the target audience who will benefit from or participate in your project. (max 500 words)

Impacts: Please describe the expected short-term impacts from your project for the above-mentioned audiences (please mention both sales, financial, career or educational impacts). (max 500 words)

Deliverables: Please list the specific deliverables you plan to provide to the CMF at the end of your project . (max 300 words)

Evaluation: Please detail how you will monitor the results and impacts of your project. (max 500 words)

Project Leads: Please detail the skills and expertise of the person(s) who will lead the project (i.e., consultants, workshop leaders, mentors etc.). (max 500 words)

Distribution/Release:

If your project includes the publication of a report, toolkit or study please provide details on your distribution plan for the materials (max 500 words)

Partners:

- *Please describe any partners and their responsibilities in relation to this project (i.e., other funders, collaborating organizations or companies). If they are confirmed please submit a letter of confirmation.*
- *If your project specifically targets any equity or sovereignty seeking community that your organization is not governed/led by (i.e., racialized, Indigenous, LGBTQ2+ etc.) please describe your relationship to this community and how appropriate protocols are/will be observed or addressed in the operation and leadership of this project.*

COVID Safety: If your proposed project includes any travel or in person events, please describe your COVID safety plan or plan to pivot your project online if needed. (max 500 words)

Additional Remarks: Please add anything about your project that will support the decision-making process. (max 500 words)

Support: For initiatives or organizations that are new, attach a minimum of 1 and a maximum of 3 letters of support. Letters of support must outline the need and value of the project and be written by representatives from organizations or professionals from the community who will benefit from the project.