



CANADA  
MEDIA FUND

FONDS DES MÉDIAS  
DU CANADA

CMF Industry Programs  
Changing Narratives Fund  
**Activity Proposal**

**Applicable to funding cycles 2025-2026 and 2026-2027**

**Please consider the environment before printing.**

Organization Name: \_\_\_\_\_

Project Title: \_\_\_\_\_

Date: \_\_\_\_\_

Please indicate the preferred funding year: ☐ 2025-2026 ☐ 2026-2027

**Projects that provide significant and measurable impacts, such as professional advancement, training or learning opportunities relating to international business development and acquisition of business acumen will be prioritized for funding. Please refer to the Evaluation Criteria section of the guidelines for details.**

- a. Please provide a brief summary of your project. (500 characters with spaces)

- b. Please explain the need for this project. What is the barrier or issue that it seeks to address? (2500 characters with spaces)

- c. What is your proposed solution to this barrier or issue? (2500 characters with spaces)

- d. Who will participate in this project and how will it benefit them? (1750 characters with spaces)

- e. Is your project national, provincial/territorial, or regional? Please specify, including all the provinces, territories, and/or regions that apply.

- f. Will your project be in-person, virtual, or hybrid? Choose one.

☐ in-person

☐ virtual

☐ hybrid

- g. How is your organization well-positioned to undertake this project? If applicable, speak to your expertise, history, and/or successes in delivering this or similar activities. (1750 characters with spaces)

- h. How are you approaching community engagement and/or outreach? (1750 characters with spaces)

- i. Who will lead this project and how are they qualified? (E.g., facilitators, leaders, experts, mentors)? Please detail their skills and expertise, as well as those of any other relevant consultants. (1750 characters with spaces)

- j. What is your approach to accessibility and inclusion for the initiative? (E.g., support services, accommodations, selection processes, etc.) (1750 characters with spaces)

k. Please provide a short timeline of activities (required)

**I certify that all the information provided is accurate and complete.**

**Applicant's Signature:**

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**Name:**

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**(Please print)**

**Title:**

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**Date:**

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**(YYYY/MM/DD)**