

Festival & Community Event Development Program Final Report

(Note to applicants using Mac OS systems: please ensure that you complete the form using the free Adobe Acrobat Reader (<https://get.adobe.com/reader/>). Right click or option-click and select Adobe Reader to open the file. If you complete the form in Preview mode the information on the form will not save or print correctly.)

FOR CCH USE ONLY		
Final Report Accepted <input type="checkbox"/> Yes <input type="checkbox"/> No	Date	Program Officer Signature
APPLICANT INFORMATION		
Name of Applicant Organization *		File Number
Event Name		
Contact Person		
Telephone	E-mail	
Proposal Start Date	Proposal End Date	
PROPOSAL INFORMATION		
Provide a brief summary (including key highlights) of this year's festival or event		
How was the funding provided by Communities, Culture & Heritage (CCH) used?		

Applicant Organization

How did CCH's funding help improve the sustainability, increase the event's viability or build capacity at the event

How was the improvement or increased noted above measured? How does this compare to previous years?

REQUIRED ATTACHMENTS

Photos of the festival or event

Photo showing CCH acknowledgement at the event, ie. Logo on signage/posters/program, etc.

Detailed final budget with receipts showing how CCH funding was spent

Applicant Organization

--

CONTACT US

Send Materials to:

Culture and Heritage Development Division
Department of Communities, Culture & Heritage
PO Box 456
Halifax, NS B3J 2R5

For further information:

Angela Dennison
Telephone: (902) 424-3876
Email: Angela.Dennison@novascotia.ca
Fax: (902) 424-0710
Web : www.novascotia.ca/cch

AUTHORIZATIONS

I hereby certify that the above information is correct to the best of my knowledge.

The personal information provided on this form and any attachments will be used only for the purposes of administering the Festival & Community Event Development Program. It is collected under the authority of Section 26(a) of the *Freedom of Information and Protection of Privacy Act* and is protected by the privacy provisions of the act.

I understand that the organization name, project or event named (as noted on the application form) and approved funding amount may be disclosed in accordance with the departmental Routine Access Policy.

Signature of Authorized Official

Name (Printed)

Authorized Official Title

Date *