

CANB Grant Program

Training and Professional Development

2024 - 2025



Name of institution:

Project title:

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

Name of institution:

Project title:

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?

Name of institution:

Project title:

2.4 Budget

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

Name of institution:

Project title:

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 aim 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 CANB 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?

Name of institution:

Project title:

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?