CANB Grant Program

Digitization, Migration, or Reformatting of Audio-Visual Material

2024 - 2025



| Application Form | n |
|------------------------------|--|
| 1.0 General Informa | tion |
| Name of Institution | |
| Project Lead | |
| Phone # | |
| Email Address | |
| Civic Address | |
| Website | |
| _ Yes _ No | Mission Statement / Mandate on file with CANB? updated and submitted. |
| 1.2 Was this application Yes | reviewed by or discussed with the Archives Advisor? |

Name of organization: Project title:

No

| 2.0 Project Proposal | |
|--------------------------|--|
| Project Title | |
| Proposed Start Date | |
| Proposed Completion Date | |

2.1 Describe the project.

Name of organization:

Project title:

- Describe the records your institution wants to digitize, reformat, or migrate.
- Why does your institution want to digitize, reformat, or migrate these records? For example, is the information inaccessible due to the format? Is the physical carrier the recording is on deteriorating?
- How does your institution plan to store the newly digitized, reformatted, or migrated records?
- How does your institution plan to use the records once they are digitized, reformatted, or migrated? For example, will the recording be used by researchers, in an exhibition, for educational purposes, etc?
- Who are your project partners? (If applicable)

| Name of organization: Project title: |
|---|
| 2.2 When were the records donated to your institution? |
| 2.3 Does your institution have a Deed of Gift for the records? Yes No Its complicated |
| 2.3.1 If you answered It's complicated, please explain why. |
| 2.4 In the Deed of Gift, was the copyright of the records transferred to your institution? Yes No |
| 2.5 In the Deed of Gift, were other rights (display, migration, and / or publication (online and in print)) of the records transferred to your institution? Yes No No Not sure |
| 2.6 Have you completed the Request for Sound and Moving Image (SMI) reformatting form in consultation with the staff of the Sound and Moving Images Division of PANB? (Please attach the SMI reformatting form when you submit your application). _ Yes _ No |

| Name of organization: |
|-----------------------|
| Project title: |

3.0 Budget

| Total cost of digitization, reformatting, or migration | | | |
|--|--|--|--|
| 1 | Total Amount Requested from CANB (CANB can cover up to 50% of the cost) | | |
| 2 | Contributions to project from other sources (i.e. funds from other institutions, businesses) | | |
| 3 | Total Amount to be Covered by Your Institution | | |

4.0 Other

4.1 Is there anything else your institution wishes the Adjudication Committee to know about regarding this application?