



Aboriginal Arts Development Awards

FINAL REPORT for ARTS ADMINISTRATOR INTERNSHIPS

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM, WHICH MUST BE SIGNED. PLEASE TYPE OR PRINT VERY CLEARLY.

**ALL SECTIONS ARE REQUIRED AND MUST BE COMPLETED.
DO NOT CHANGE OR REMOVE QUESTIONS FROM FINAL REPORT FORM.**

Section 1 – Contact Information FILE # _____ GRANT YEAR: _____

INTERN NAME: _____

HOST ORGANIZATION NAME: _____

CONTACT PERSON/MENTOR: _____

ADDRESS: _____

CITY: _____ PROVINCE: _____ POSTAL CODE: _____

TELEPHONE: _____ OTHER _____

FAX: _____ WEBSITE: _____

Section 2 – Brief Project Description (*Who, what, when, where*) maximum 30 words

Section 3 – Project Activities

Describe the steps that were taken. Describe in detail any workshops, mentorship, and activities that occurred. Include a timeline indicating key events (Dates, Learning Objectives, General Tasks, People/Mentors Involved). Additional pages and support material can be attached.

***** Attach additional details where needed *****

Section 4 – Project Outcomes

- A.** Describe the project's contribution toward the professional development of the intern, and to the arts community they serve. Describe if the project included the transmission of traditionally based arts skills and knowledge.
- B.** Describe challenges or changes to your originally proposed project plan, and the strategies you used to meet these challenges.
- C.** What unexpected benefits or learning resulted from this project?

Section 5 – Community Engagement (ALL SECTIONS ARE REQUIRED)

How many artists will be served by this project:

How many communities will be involved with this project:

Please list the First Nations/Aboriginal communities or bands that were served and/or involved with this project:

How many workshops were offered during this project (*if applicable*):

Where were the workshops offered, list cities/towns (*if applicable*):

How many people participated in the workshops (*if applicable*):

Age range of the main mentor(s) or workshops leaders:

- 19-35 36-45 46-55 56-65 66 and older Not applicable

Age range of the workshop(s) participants:

- 1-10 11-18 19-35 36-45 46-55 56-65
 66 and older Not applicable

OUTCOME SUMMARIES (Please check all those that apply):

- Increased the intern's skills
- Provided intern with mentorship
- Enhanced intern's professional network
- Conducted research
- Organized workshops, events and other arts activities
- Community network building
- Support, documentation and promotion of local artists
- Transmission of traditional arts skills and knowledge
- Other, please explain: _____

REGION (where the project will take place):

- North Coast (including Haida Gwaii)
- Lower Mainland (including Fraser Valley)
- Central Coast (including West Coast and North end of Vancouver Island)
- North Interior (Prince George & North)
- South & Central Interior
- South Vancouver Island (Nanaimo & South)
- Other _____

ARTISTIC DISCIPLINES (Please select all those that will be included in the project):

- Visual
- Visual-Textiles
- Visual-Carving
- Music
- Dance
- Storytelling/Words
- Multiple-Disciplines

Please provide additional details about the specific art practice(s): _____

How did your relationship with the FPCC's Aboriginal Arts Development Awards program begin, or how did you hear about us? Check all that apply.

- Previous contact through someone else's funded project
- Word of mouth
- Social media
- Website
- Radio ad
- Met an FPCC employee at an event or workshop _____
- Other _____

Section 6 – Needs Assessment

Please provide your opinion or observations in relation to the questions asked. This information assists FPCC with planning and improving our services and programs.

1. **Indigenous Arts Landscape:** What artforms are strongest in your community? What trends or forces do you see influencing our art in a positive way?

2. **Challenges & Needs:** What challenges do you see artists facing? What other issues affect the arts in your community?

3. Do you see any of the following challenges or needs in your community?

- Reduced number of mentors who know/teach traditional artforms
- Environmental issues, that make it harder to find local traditional materials
- More funding is needed for individuals and organizations
- Making a living is competing with time for art creation
- No space or studio for creating art
- Expensive to buy materials
- Difficulty entering the market to sell artwork
- Unable to receive a price that matches artistic expertise & time spent on creating the art

4. **Solutions & Recommendations:** What would you like to see happen with the arts, and for the artists in your community? How do you think this could happen? What resources and support are needed? If there was unlimited funding available, how do you think our arts and artists could be supported?

5. Do you find any of the below options supportive to arts and artists in your community?

- A program or organization that sells authentic traditional materials to artists and wholesale items
- Micro grants that have a short turnaround time for individuals and organizations
- Multiple year funding (renewed if objectives were met and project is completed)
- A collaborative organization that provides space to the community for creating art
- Marketing, business skills, and teaching training offered

6. What would you like to see FPCC do to respond to your recommendations or identified solutions?

Section 7 – Personal & Artform Assessment

This information assists FPCC with planning and improving our services and programs.
THESE QUESTIONS ARE FOR THE INTERN INVOLVED IN THE PROJECT.

1. Have you worked in art administration role before? Yes No

2. How long have you worked in an administrative role?

Less than 1 year 1-2 years 3-5 years 10 + years

3. Are you an artist? Yes No

ARTISTIC DISCIPLINES (Please select all that apply to your arts practice):

- Visual
- Visual-Textiles
- Visual-Carving
- Music
- Dance
- Storytelling/Words
- Multiple-Disciplines
- Not Applicable

Please provide additional details about the specific art practice(s): _____

4. Are business skills relevant to your arts/professional practice? Yes No

5. How would you rate your level of business and marketing skills?

Novice Beginner Intermediate Advanced Expert

6. How would you rate your cultural arts knowledge **before** the project?

Novice Beginner Intermediate Advanced Expert
 Not Applicable

7. How would you rate your cultural arts knowledge **after** participating in the project? (Has your knowledge increased?)

Novice Beginner Intermediate Advanced Expert
 Not Applicable

Comments: _____

8. What level of income from your art allows you to be self-sustaining?

- No income (*you don't generate income from your art*)
- Quarter income (*25% of your income comes from your art, and 75% other sources*)
- Half income (*50% of your income comes from your art, and 50% other sources*)
- Three-fourths income (*75% of your income comes from your art, and 25% other*)
- Full income (*your art practice is your only source of income*)
- Not applicable

9. If you answered no income, please indicate if any of the below reasons apply to you:

- I make traditional artwork that is not to be sold or exhibited outside my community
- I usually gift my artwork to community and family members
- I am an emerging or early career artist
- Other, please explain: _____

10. What is your level of satisfaction with the income your art generates?

- Very satisfied Somewhat satisfied Neutral Somewhat unsatisfied
- Very unsatisfied Not applicable

11. What is your level of satisfaction from being an artist?

- Very satisfied Somewhat satisfied Neutral Somewhat unsatisfied
- Very unsatisfied Not applicable

12. How many people directly benefited from your internship or mentorship? (artists, mentors, workshop participants)

- 1 to 5 people 6 to 15 people 16 to 30 people 31 to 50 people
- 51 or more people

13. If your host organization held arts workshops or activities, how many participants do you estimate will continue to pursue learning more about the art form or skills learned in the workshop?

- 1 to 5 people 6 to 15 people 16 to 30 people 31 to 50 people
- 51 or more people Not applicable

14. In what ways did you help promote and support local artists? _____

15. Is your Indigenous language a part of the internship or mentorship? Yes No

If yes, how is this incorporated?

Other comments or notes from the above questions:

Section 8 – Financial Information

AMOUNT OF ABORIGINAL ARTS DEVELOPMENT AWARD RECEIVED: _____

YEAR RECEIVED: _____

<u>PROJECT EXPENSES</u>	PROPOSED	ACTUAL	<u>PROJECT REVENUES</u>	PROPOSED	ACTUAL
ARTISTS' FEES/SALARIES (Names)	\$	\$	FIRST PEOPLES' CULTURAL COUNCIL	\$	\$
OTHER FEES/SALARIES (Names)	\$	\$	OTHER GRANTS	\$	\$
OTHER FEES/SALARIES (Names)	\$	\$	OTHER GRANTS	\$	\$
MATERIALS (Describe)	\$	\$	EARNED	\$	\$
TRAVEL (Describe)	\$	\$	PRIVATE	\$	\$
TECHNICAL EXPENSES (Describe)	\$	\$	IN-KIND CONTRIBUTIONS	\$	\$
ADMINISTRATION COSTS (Describe)	\$	\$	OTHER	\$	\$
OTHER	\$	\$	OTHER	\$	\$
OTHER			OTHER	\$	\$
OTHER	\$	\$	OTHER	\$	\$
TOTAL EXPENSES	\$	\$	TOTAL REVENUES	\$	\$
			PROJECT SURPLUS/(DEFICIT) = Actual Revenues – Actual Expenses	\$	

NOTES:

Section 9 – Support Documentation

Ensure that you attach copies of the following items to this final report:

- A. Copies of images, photographs, video or other documentation, as well as printed material related to the project.
- B. List of title(s) of any work(s) produced through the project.
- C. List of any public presentations related to the project.

I consent to allowing FPCC to use photos and other documentation of my project for the organization's promotional and reporting purposes. Note: promotion of our work to funders and other stakeholders is important to the ongoing success of the program.

Yes **No** _____ **Initial**

Section 10 – Declaration

I do solemnly declare that, to the best of my knowledge, all information contained in this report is complete and true in every respect.

Print full name of intern: _____

Signature of intern: _____ Date: _____

Print full name of mentor: _____

Signature of mentor: _____ Date: _____

Print full name of Chair/President/Authority (*if different*): _____

Signature of Chair/President/Authority: _____ Date: _____