



BURSARY REPORT

PLEASE PRINT

1. Name _____ (name to appear on cheque*)
Address _____

Phone (_____) _____
e-mail _____

*NOTE: The bursary payment will be endorsed and mailed to the individual or ensemble named above. The cheque can be made out to an ensemble only if the ensemble has a bank account under its own name.

2. Title of Event _____
Date(s) _____
Venue _____
City / Town _____

3. Write a short report {max 1 typed page} on the completed activity, and benefits to the individual, ensemble and / or community. Provide a couple of illustrative / supporting materials if available (e.g., media review, audience feedback, recital programme, poster, workshop agenda)
4. Complete and sign the budget worksheet to show final income and expenses.
5. Attach original receipts for the expenses covered wholly or in part by the bursary.
6. I / we certify that this report accurately represents the completed activity:

Signature of recipient _____ Date _____

Signature of recipient* _____ Date _____

***For ensembles, two members must sign.**

Mail the report to:

Bursary Committee, Early Music Society of the Islands, 1067 Victoria Street, Victoria BC V8S 4N9

If you have questions, please leave a message at (250) 882-5058 or send e-mail to: info@EarlyMusicSocietyoftheIslands.ca



BURSARY FINAL BUDGET

NAME _____ (*Individual or ensemble*)

Eligible Expenses for Activity		Income / Revenues from Activity	
Travel**		Ticket sales	
Meals**		Net sales of merchandize, food, etc	
Accommodation**		Other sales	
Registration / Tuition**		Individual cash donations	
Fees for artists / instructors		Fees earned by individual / ensemble**	
Expenses for artists / instructors		Reimbursements to indiv. / ensemble**	
Publicity		Prizes / awards for activity	
Venue Rental			
Tickets & Programmes			
Equipment rentals & transport			
Other (specify – the EMSI Bursary Committee will determine which are eligible):		List all requested [R] and confirmed [C] grants from governments, corporations and other organizations:	
		__R__C EMSI Bursary	
		__R__C	
		__R__C	
		__R__C	
		__R__C	
Total		Total	

****If the applicant is a group or ensemble, show the total for the group**

I / we certify that this budget is an accurate statement of projected OR actual income and expenses:

Signature _____ Date _____

Signature* _____ Date _____

* **For ensembles, two members must sign.**