

 **Arts Education and Advocacy Unit Award Application**

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| Unit name: |  |
| Unit Address: |  |
| Council: |  |
| Unit contact person: |  |
| Contact person phone/email: |  |
| Contact person position: |  |

\*\*\*Please attach a copy of your unit’s approved 2017-18 budget

What arts program did you develop?

Why was this arts program developed?

(See next page for more questions)

How was the arts program implemented?

How will you continue to promote and sustain your arts program’s objectives through the year?

What was the impact of your arts program on your school community?