

Program proposal form

Are you interested in partnering with City Library staff to create a public program? Please fill out this form and include as much information as possible to start the conversation.

The library plans programs several months in advance. While we welcome ideas from everybody, we receive many proposals and do not have the capacity to offer them all. Successful programs speak to the library's strategic priorities and offer community connection.

Please review our [Strategic Plan\(7 MB\)](#) and [Public Programming Policy](#) before submitting the form.

Program proposal form

Do you have a program you'd like to see at the library? Are you interested in partnering with City Library staff to create your own program? Please fill out as much of this form as possible to start the conversation. Successful programs at City Library speak to the library's values and offer community connection. [Learn more about our mission and values.](#)

Name

First

Last

Pronouns

Email address

Email address

Confirm email

Phone

Your website URL (if applicable)

Target audience (check all that apply)

- ? Early years (0 – 5 years old)
- ? Middle years (6 – 12 years old)
- ? Teen (13 – 17 years old)
- ? Adult
- ? Senior
- ? All ages

Language of program

Length of program

Will you require an honorarium?

- ? Yes
- ? No; offered to the library at no charge

Please enter a flat rate or charge for the honorarium

Does your program require the purchase of supplies?

- ? Yes
- ? No

Please enter an amount for supplies

Please provide a detailed outline of your program:

How does this program align with NVCL's strategic priorities?

[See our 2025-2029 Strategic Plan](#)

What will participants get out of this program?

Describe yourself and tell us why you're the right person or organization to deliver this program. Please outline your experience and expertise in this area, including general presenting/facilitating experience.

Have you delivered this program at any other venues, or have you submitted this program proposal to other organizations?

Reference (optional)

Name of your reference

First name of your reference

Last name of your reference

Pronouns

In what capacity do you know this reference?

Phone number of your reference

Email of your reference

Email of your reference

Confirm email

Security Check

Freedom of Information and Protection of Privacy Act Notice

The library is collecting your personal information in accordance with Section 26(c) of the Freedom of Information and Protection of Privacy Act. If you have any questions, please contact us at 120 14th St. West, North Vancouver, BC, V7M 1N9, or [604-998-3495](tel:604-998-3495) or privacy@nvcl.ca.