#### Regional Arts Fund Project Grant Application

\* indicates a required field

#### Regional Arts Fund Project Grants

Project Grants are provided through the Australian Government's Regional Arts Fund, devolved through Regional Arts Australia and administered in each state by Regional Program Administrators.

Project Grants provide funding for high-quality arts projects benefiting regional or remote artists, arts workers, audiences, and communities. The focus of the project could include any area of creative practice, multiple art forms, or cross-disciplinary practice.

Funding for up to \$30,000 is available through this grant program. There is no minimum amount you can apply for.

#### Preparing to write your application

Grant applications take a significant amount of your time and energy to prepare.

To give yourself the best chance of success it is important that you read the <u>Regional Arts Fund Grants Guidelines</u>, and the <u>Regional Arts Fund Eligibility Notes</u> as they contain valuable information on what kind of applicant type, project, or expenses are eligible for funding, and the criteria for assessing the grant.

To be eligible for a RAF Project Grant, your Australian Business Number (ABN) that you supply must match your name and current address. Please make sure your ABN is up to date by checking the <u>Australian Business Register</u>

You may only apply for funding from the Regional Arts Program Administrator that represents the state or territory that your ABN is registered in.

Please contact your Regional Arts Fund Program Administrator in the state or territory in which you are applying to for further assistance. A list of the Regional Arts Australia state and territory offices can be found <a href="https://example.com/here">here</a>.

Have you read through the Regional Arts Fund Guidelines? *	0	Yes No
Have you discussed your application with the Regional Program Administrator in your State or Territory? *	_	Yes No

#### Eligibility

\* indicates a required field

**Activity Dates** 

This round is for projects starting Grants is two years.	after 1 July 2024. The maxim	num grant period for Project
Start Date *	Must be a date and no earlier th	nan 1/7/2024.
End Date *	Must be a date. Must be no later than two years	from Start Date.
As the start date of your project f round.	alls prior to 1 July 2024, it is r	not eligible to be funded in this
Please contact the Regional Arts discuss your eligibility. A list of th found <a href="here">here</a> .		
Applicant Eligibility		
Have you already received a Regional Arts Fund Project Grant this financial year? *	○ Yes	○ No
As you have already received a P apply in this round.	roject Grant in this financial y	ear, you are not eligible to
Do you have any outstanding reports, acquittals or serious breaches relating to any Australian Government funding or funding from a state or territory Regional Program Administrator? *	○ Yes	○ No

You are not eligible to apply in this round as you have outstanding reports, acquittals or serious breaches relating to any Australian Government funding, or funding from a state or territory Regional Program Administrator.

Please complete any relevant acquittals or reports before continuing.

#### **Location Eligibility**

# Organisations or individuals based in metropolitan locations are not eligible to apply for the Regional Arts Fund.

Metropolitan organisations or individuals can partner with a regional organisation/community to deliver a project. In these circumstances, the regional organisation/community should submit the application.

Please enter your primary address below to determine your eligibility for this funding.

Your primary address must be a physical address, not a PO Box or postal address. If you have an ABN, it should match the postcode listed on your ABN record.

### Applicant Primary Address \*

#### Address



Address Line 1, Suburb/Town, State/Province, Postcode, and Country are required. Country must be Australia

#### **Applicant MM Location**

To determine eligible locations the program uses the Modified Monash Model.

To check if the applicant is based in an eligible location, visit <a href="https://www.health.gov.au/resources/apps-and-tools/health-workforce-locator">www.health.gov.au/resources/apps-and-tools/health-workforce-locator</a> and follow the directions below:

Enter your **Primary Address** into the 'Address' box at the left-hand side of the page

- Tick the box beside 'Modified Monash Model', selecting the most recent year
- Press 'Search location'

All locations with Codes from MM 2 to MM 7 are eligible under the Regional Arts Fund.

• Schools are only eligible if they are located in very remote areas (MM7).

What is the MM classification of the primary address listed above? \*

#### **Ineligible Location**

Your answer to the Applicant MM Location question indicates that your activity may not be eligible for this funding round.

Please contact the Regional Arts Fund Program Administrator in your State or Territory to discuss your eligibility. A list of the Regional Arts Australia State and Territory offices can be found here.

#### **Applicant Type**

To be eligible you must:

- be an individual or Australian incorporated organisation or local government organisation
- have an active Australian Business Number (ABN) that is registered to your name and location

Unincorporated groups are eligible for funding if auspiced by an organisation that meets the above criteria.

Schools are only eligible to apply if they are located in a very remote area (MM 7) as defined using the Modified Monash Model available at <a href="https://www.health.gov.au/health-workforce/health-workforce-classifications/modified-monash-model">www.health.gov.au/health-workforce/health-workforce-classifications/modified-monash-model</a>.

If you are uncertain whether your organisation or project is eligible please contact the Regional Program Administrator prior to submitting your application.

What Type of Applicant are you? \*

If your applicant type is not listed, or you are unsure which one to choose, please contact the Regional Program Administrator in your State or Territory. For more information about eligible applicant types, see section 4.2 of the guidelines.

#### Individual ABN

Do you have an ABN that is registered to your name and location? *	○ Yes	○ No
Individual Age		
Are you under 18 years of age? *	○ Yes	○ No

#### Ineligible Applicant Type

Individual applicants must have an active ABN to be eligible for the Regional Arts Fund.

Your ABN must be registered to your name and primary address.

You can apply for an ABN, or update your address through the Australian Business Register.

#### **Auspice Required**

You will need your application to be auspiced by an organisation that meets the following criteria:

- an Australian incorporated organisation or local government organisation
- if required by the Australian Tax Office, be registered for the purposes of GST
- not have any outstanding reports, acquittals or serious breaches relating to any Australian Government funding or funding from a state or territory Regional Program Administrator. A serious breach is one that has resulted in, or warrants, the termination of a grant agreement.

#### All activities undertaken must have the support and approval of the auspice body.

You and your auspice body should be aware that the auspice body will need to enter into a legally binding grant agreement with the Regional Program Administrator. The auspice body will be responsible for meeting the obligations set out in the agreement as well as managing, reporting on and acquitting the funding.

You will be required to enter the details of your auspicing organisation in the Applicant Details section of this form.

#### **Auspice Required**

You will need your application to be auspiced by an individual who is over 18 and has an active ABN.

The individual auspicing your application should be aware that they will need to enter into a legally binding grant agreement with the Regional Program Administrator.

The individual auspicing your application will be responsible for meeting the obligations set out in the agreement as well as managing, reporting on and acquitting the funding.

You will be required to enter the details of the individual auspicing your application in the Applicant Details section of this form.

ABN	Detai	ls
ABIN	Detai	15

_				
Δni	olica	nt ∆	<b>IBN</b>	*

The ABN provided will be used to look up the following information. Click Lookup above to check that you have entered the ABN correctly.

Information from the Australian Business Register

ABN

Entity name

ABN status

Entity type

Goods & Services Tax (GST)

DGR Endorsed

ATO Charity Type

ACNC Registration

Tax Concessions

Main business location

Must be an ABN.

Does the 'Main business location' listed above match the postcode in your primary address provided? \*

○ Yes ○ No

Please contact the Australian Business Register to update your details here: <a href="https://www.abr.business.gov.au/Help/UpdateABNDetails">https://www.abr.business.gov.au/Help/UpdateABNDetails</a>

Regional Arts Funding can only be paid to applicants whose physical address matches their ABN 'main business location'.

You can submit this form and then proceed with updating your 'main business location'. We will still process your application.

#### **Applicant Details**

\* indicates a required field

**Applicant Name** 

	Please enter the contact details for the primary contact person for this application. All correspondence regarding the application will be sent to this person.			
• •	<ul><li>Individual</li><li>Organisation Name</li></ul>	○ Organisation		
	First Name	Last Name		
Applicant Contact Details				
Organisation Contact *	First Name	Last Name		
Organisation Contact Position *				
Applicant Postal Address *	Address			
Applicant Primary Phone Number *	Must be an Australian pho	one number.		
Applicant Primary Email *	Must be an email address	5.		
Applicant Primary Website	Must be a URL.			
Auspice Information (Individual)				
Your answers to the eligibility questions indicate that your application must be auspiced by an individual over 18 with an active ABN.				
For more information about applications from auspice bodies, please see clause 7.1 in the Regional Arts Fund Guidelines <u>here</u> .				
Auspice Contact Name *	First Name	Last Name		

Auspice Contact Primary Email \*

Must be an email address.

**Auspice Contact Primary Phone Number \*** 

Must be an Australian phone number.

Auspice ABN \*

The ABN provided will be used to look up the following information. Click Lookup above to check that you have entered the ABN correctly.

Information from the Australian Business Register

ABN

Entity name

ABN status

Entity type

Goods & Services Tax (GST)

**DGR Endorsed** 

ATO Charity Type

More information

**ACNC** Registration

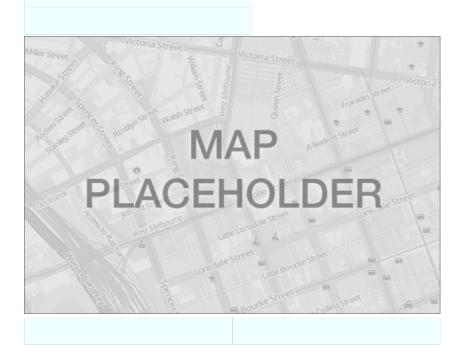
Tax Concessions

Main business location

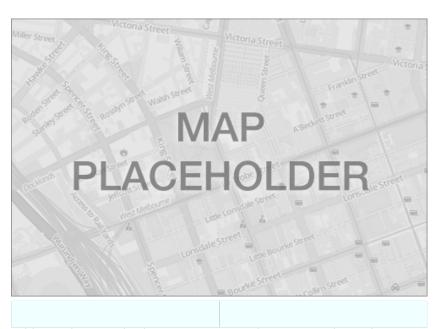
Must be an ABN.

Auspice Contact Primary Address \*

Address



Auspice Contact Postal Address *	Address	
Auspice Information (Orga	anisation)	
Your answers to the eligibility que an organisation that meets the el	estions indicate that your applicati igibility criteria.	on must be auspiced by
For more information about applic Regional Arts Fund Guidelines he	cations from auspice bodies, pleas <u>re</u> .	se see clause 7.1 in the
Auspice Organisation Name *	Organisation Name	
Auspice Organisation Primary Email *	Must be an email address.	
Auspice Organisation Primary Phone Number *	Must be an Australian phone number	
Auspice Organisation ABN *	The ABN provided will be used to information. Click Lookup above t entered the ABN correctly.	
	Information from the Australian Busi	ness Register
	ABN	
	Entity name	
	ABN status	
	Entity type	
	Goods & Services Tax (GST)	
	DGR Endorsed	
	ATO Charity Type	More information
	ACNC Registration	
	Tax Concessions	
	Main business location	
	Main basiness location	
	Must be an ABN.	



Address Line 1, Suburb/Town, State/Province, Postcode, and Country are required.

	Country are required	i.	
Auspice Organisation Postal Address *	Address Line 1, Subu Country are required		rovince, Postcode, and
Auspice Organisation Primary Website	Must be a URL.		
Applicant identification			
Does the applicant identify as any of the following? *	☐ Aboriginal or Torres Strait Islander	☐ LGBTQIA	□ None of the above
	☐ Culturally and Linguistically Diverse	$\square$ Youth (25 y and under)	ears 🗆 Other.
	☐ A person with disability	☐ Would rathonot say	er
Indigenous or Non-Indige	nous Organisat	ions	
Is the organisation an Indigenous organisation? *	<ul><li>○ Yes</li><li>○ No</li></ul>		

Please select one definition below that best describes how your Indigenous organisation is structured:

**Tier 1 -** An incorporated Aboriginal or Torres Strait Islander organisation with at least 51% Indigenous ownership **and** at least 51% Indigenous control via its governing body that is either:

- Tier 1a a Community-controlled\* organisation where the above thresholds are mandated by its governing rules or legislation;
- Tier 1b not a Community-controlled\* organisation but meets the above 51% Indigenous ownership and 51% Indigenous control thresholds.

**Tier 2** - Another organisation, with at least 50% Indigenous ownership or 50% Indigenous control

How is your Indigenous organisation structured? *	☐ Tier 1a ☐ Tier 1b ☐ Tier 2 *Community-controlled means an Indigenous organisation with majority Aboriginal and/or Torres Strait Islander ownership and control, and that is operated for the benefit of Aboriginal and Torres Strait Islander communities.
Applicant's history with th	e Regional Arts Fund
What is your history with the Regional Arts Fund? *	
Please use this space to provide any further information regarding the applicant's history with the Regional Arts	This is an optional question

#### **Project Details**

Fund

\* indicates a required field

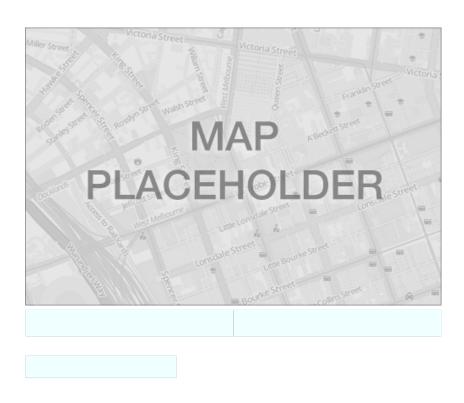
**Project Details** 

Please note, the Project Title and Project Summary entered below must be suitable for publication. These details will be used to promote your project, if successful. We recommend that the Project Summary is written in the third person and does not contain dots points or lists.

What level of funding are you applying for? \*

- Projects \$0 to \$7,500
- O Projects \$7,500 \$30,000

Project type *	oject type *				
Project title *					
	lf y	our application is	successful, this	will be published publicly.	
Project summary *					
	Mu If y	ord count: st be no more the our application is olicly.		summary will be published	
What is the main artform of your proje	ect?	nore than one ma	in artform please	e select 'cross artform'	
Describe your projectin detail, outlining we you plan to do, how you plan to do it and what you want to achieve.	hat you at *	ord count:			
Project Plan		st be no more tha	n 500 words.		
Activity	Outcome/s	Start	Date	End Date	_
		Must k	e a date.	Must be a date.	<u> </u>
Project Location  Please list the main pro	viect location	nlus any other l	ocations where	your project will take	
place (if applicable).	geet location,	plus arry other i	ocacions where	your project will take	
If your project location the map to select the		have a street	address, you	can double click on	
Visit <u>www.health.gov.au</u> Category of the Project	u/resources/a	pps-and-tools/h	ealth-workforce	e-locator to find the MM	
What is the street address of the main project location? *	Ac	dress			



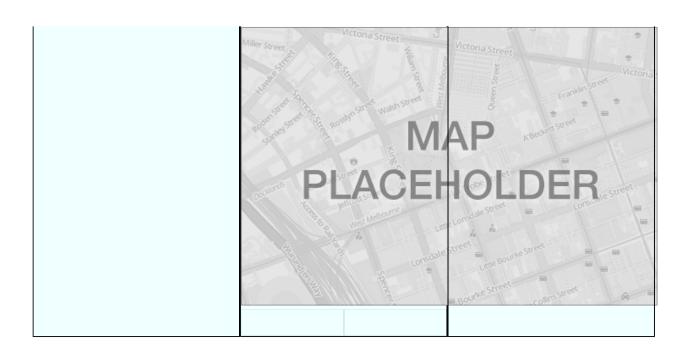
What is the MM of the main project location? \*

Does your project have workshops or presentation outcomes in another location? \*

0	Yes	$\circ$	No

Please list the other locations where your project will take place.

Venue/Location Name	Address	MM Category
	Address Line 1, Suburb/Town, State/Province, Postcode, and Country are required.	



#### People

\* indicates a required field

Project Personnel & Partners

Will there be any other people or organisations involved in this project?

○ Yes○ No

Please provide details below for any other people or organisations involved in this project.

Participant and partner types may include:

- Participating Artists/Performers
- Collaborators
- Mentors
- Financial Partners
- Venue Partners
- Presenting Partners
- Host organisations

Evidence of confirmed status may include:

- Letters
- Email correspondence
- Video or audio recording

Please ensure that any email correspondence, video, or audio recording is only shared with the explicit permission of all parties.

	Participant/ Partner Type	Relationship Type	Status	Evidence of confirmed status
Employment				
Will your project people? *	employ	○ Yes ○ No		
Please provide em relevant.	ployment statis	stics for your activity	, making sure	to <b>include yourself</b> if
When selecting the	e employment	status, please note:		
<ul> <li>An independe</li> </ul>	nt contractor ir	udes those whose em ncludes owners and i ncluding sole-traders	managers of ir	
Please list <b>paid er</b>	nployees only	<b>/</b> .		
Job Title/Role	Er	mployment status	Numl	ber of employees
Total number employment opportunities:		This number/amount	s calculated.	
Will your project audience? *	have an	<ul><li>Yes</li><li>No</li></ul>		
Estimated audie numbers - LIVE *		Must be a number.		
Estimated audie numbers - DIGIT		Must be a number.		
How did you cald these numbers?				
Tell us about wh	o your			

audience is: \*

	Word count: Must be between 50 and 150 words.
Participants	
Will your project have participants? *	○ Yes ○ No
Estimated participant numbers - LIVE *	Must be a number.
Estimated participant numbers - DIGITAL *	Must be a number.
How did you calculate these numbers? *	
Tell us about who the participants are: *	
	Word count: Must be between 50 and 150 words.
Beneficiaries	
Who are the primary beneficiaries of your project? *	
Is this activity being led by the primary beneficiary listed above? *	<ul> <li>Yes - the Applicant or Project Lead(s) identifies with the primary beneficiary listed above.</li> <li>No - the Applicant or Project Lead(s) do not identify with the primary beneficiary listed above.</li> </ul>
any consultation that has helped	with the primary beneficiary group. Provide details of to shape this project, or support for the project from the t your support material contains evidence of this support.
Relationship to primary beneficiary: *	

#### Regional Arts Fund Assessment Criteria

\* indicates a required field

#### Response to the Assessment Criteria

This section asks you to describe how your activity will meet the assessment criteria for the Regional Arts Fund.

Please select and respond to **the most relevant** example/s for each assessment criteria.

#### Tips

- Concise, clear and direct responses are easier to asses than long wordy responses.
- You are not expected to respond to every example choose only the relevant ones. This may only be one for each criterion. You will have a higher chance of success if you only respond to relevant examples.
- Keep your response size relative to the funding requested. For example, if you are asking for \$500 there is no expectation that you will write 500 words for each response. 50-100 will be sufficient.

#### Criterion 1: Impact

Encourage and support sustainable economic, social and cultural outcomes in regional communities.

communities.	
Please identify the most relevant example/s that will be addressed by your activity: *	<ul> <li>□ Long term outcomes for regional communities</li> <li>□ Demonstrated need for the project in the community</li> <li>□ Creation of opportunities for future arts and cultural activity</li> <li>□ Sustainable economic or social benefits (eg tourism, employment, health and wellbeing, social cohesion, access)</li> </ul>
How will your activity achieve the Impact outcome/s identified above? *	Must be no more than 500 words.

#### Criterion 2: Support and Partnerships

Develop partnerships and networks which leverage financial and/or in—kind support for regional arts projects and encourage ongoing collaboration.

Please identify which of the following examples of support and partnerships will be addressed by your activity: \*

	Community support and engagement
	Financial and project partners
	Level of co-contribution (cash and/or in-kind)
	Development of networks, collaborations and
pai	rtnerships

Make sure to upload evidence of community support and engagement in the **Support Material** section of this form. For example, letters of support or testimonials for your project.

Ensure you have listed your financial and project partners in the <b>People</b> section of this form.		
Make sure to detail any cash or	in-kind contributions in the <b>Budget</b> section of this form.	
Describe how this project will develop networks, collaborations or partnerships: *	Word count:	
Criterion 3: Reach	Must be between 50 and 150 words.	
Develop audiences and broaden	community engagement with the arts.	
Please identify which of the following examples of reach will be addressed by your activity: *	<ul> <li>□ Access to social and cultural development opportunities for diverse communities, practitioners, participants and/or audiences</li> <li>□ Opportunities for community members or groups to participate in the arts</li> <li>□ Development of audiences by attracting new attendees/participants or extending their experience of the arts</li> <li>□ Geographical spread of the project</li> <li>Ensure you have listed all of the project locations in the <i>About your Project</i> section of this form.</li> </ul>	
How will your activity achieve the Reach outcome/s identified	Must be no more than 500 words	
above? *	Must be no more than 500 words.	
Criterion 4: Opportunity		
Increase employment and profe of, regional and remote artists.	ssional development opportunities for, and raise the profile	
Please identify which of the following examples of opportunity will be addressed by your activity: *	<ul> <li>□ Employment opportunities for regional artists or arts workers</li> <li>□ Profile raising of regional artists or arts workers</li> <li>□ Opportunity for an artist to access an exceptional or rare opportunity</li> <li>□ Skills development</li> </ul>	

Ensure you have listed all employ the <b>People</b> section of this form.	yment opportunities that will be created by your project in
How many regional artists or arts workers will have their profile raised through this project? *	Must be a number.
How many regional artists or arts workers will develop new or existing skills through this project? *	Must be a number.
How will your activity achieve the Opportunity outcome/s identified above? *	Must be no more than 500 words.
Criterion 5: Quality & Vial	
Support quality and viability of a	rtistic and cultural activity.
Please identify which of the following examples of quality and viability will be addressed by your activity: *	<ul> <li>□ Experience/calibre of the applicant organisation/individual in the relevant field</li> <li>□ Skills, expertise/calibre of the key personnel including participating artists</li> <li>□ Benefits to project participants</li> <li>□ Benefits to audiences, the arts and cultural sector and the Australian community</li> <li>□ Need for funding support</li> </ul>
	Make sure to upload your Curriculum Vitae (CV) or organisational document in the <b>Support Material</b> section of this form, ensuring it details your experience/calibre in the field/s relevant to this project.
	Make sure to upload a brief bio or Curriculum Vitae (CV) for key artists, personnel or other collaborators in the <b>Support Material</b> section of this form.

How will your activity achieve the Quality & Viability outcome/s	
identified above? *	Must be no more than 500 words.

All applications will be assessed on the quality and viability of the Project Plan and Budget.

#### **Budget**

\* indicates a required field

Regional Arts Fund Grant Amount Requested

Total Amount Requested *	\$
	Must be a dollar amount.

#### Cash Income

In the table below, please enter any income that you have received, or plan to receive from the project, **including this grant.** 

Do not include in-kind support, this will be captured in another section.

Types of cash income could include:

- Other grant funding including, Australia Council funding, state or territory funding, or local government funding
- Revenue generated from the project (ticket sales, sales of artwork, services offered, etc)
- Funds that you, your organisation, or other people/organisations have contributed to your project.
- Sponsorships and fundraising

For each amount listed, state whether the funding is confirmed or not confirmed. For example, if you have already received funding for the project, this would be listed as **confirmed**. If you have not yet received funding but expect to receive funding (for example tickets sales from an event, or sales of work), list this as unconfirmed funding.

Income Source Category	Income Source Description	Income Amount	Confirmation
		Must be a dollar amount.	
RAF Project Grant (this grant) Other grant funding Revenue generated from the project Own contribution Fundraising and sponsorships Other		\$	

	\$
	\$

#### Cash Expenditure

In the table below, please detail how you plan to spend the funds listed above in the Cash Income table. Include all of your activity costs, including any that may be paid for using other funds. Make sure to identify whether costs will be paid for using this grant or another income source.

List each item, activity or service that has a cost. This could include:

- Venue fees
- Transport/travel fees
- Artist & arts workers fees
- Arts resources & materials

In the \$ column, list the total dollar amount for each expenditure item.

Expenditure Category	Expenditure Item Description	Expenditure AmountThis grant or other source
		Must be a dollar amount.
		\$
		\$
		\$

#### Cash Totals

The Total Cash Income Amount and Total Cash Expenditure Amount will be calculated from the information you have provided in the budget tables above.

The Cash Balance is calculated as the Estimated Total Cash Income Total amount **minus** the Total Cash Expenditure Amount.

The total amount listed in the Cash Income Budget table **must** equal the amount listed in the Cash Expenditure table.

Total Cash Income	\$ This number/amount is calculated. Grant Amount Requested + Other Cash Income
Of the total Cash Income calculated above, how much is the applicant personally contributing?	\$ Must be a dollar amount. Enter 0 if none. This data is used for reporting purposes only.
Total Cash Expenditure	\$ This number/amount is calculated. Total Cash Expenditure

Cash Balance - must equal '0' \*

\$
This number/answer is called

This number/amount is calculated. Total Cash Income - Total Cash Expenditure

#### In-Kind Support

In-kind support includes the donation of goods or services that you may receive towards your project. These are contributions that would usually cost money if they weren't being donated.

In-kind support may include:

- Venue or work space provided free of charge
- Donated materials
- Time and expertise
- Free marketing or advertising

To strengthen your application, it is recommended that you provide evidence of in-kind support in your support material, in the form of letters of support.

If you have questions about in-kind support please contact the Regional Program Administrator in your state or territory.

Item	Source	Value
What is being provided?	Where is it coming from?	If you had to pay for this, how
		much would it cost?
		\$
		\$

#### Total in-kind contributions to your project

Total	In-Kind	Support
-------	---------	---------

\$

This number/amount is calculated.

Of the total in-kind support calculated above, how much is the applicant personally contributing? \*

\$

Must be a dollar amount. Enter 0 if none. This data is used for reporting purposes only.

#### Total Project Cost & Leveraged Income

Leveraged Income is the amount of money you have sourced that does not include your own contribution. It includes the value of the in-kind contributions.

Total Project Cost \*

This number/amount is calculated.
Total Cash Income + Total In-Kind Support

Estimated Leveraged
Income \*

This number/amount is calculated.
Must be zero or more.

Notes about your budget		
How did you calculate the rates of pay for personnel? *		
personnen	If there are no personnel being paid, please explai	n why.
Is there any other information you would like to provide about		
your budget that might help explain it to the assessors?		
Please upload any	Attach a file:	
supporting quotes or evidence of budget costs		
Optional - if you would	Attach a file:	
like to provide your budget notes as a	Account a me.	
separate document, please upload here:		
Protocols		
* indicates a required field		
Aboriginal and Torres Strait Islander People and Cultural Materials		
Does your project involve Aboriginal and/ or Torres Strait Islander people or cultural content? *	O Yes O No Please answer yes if any project staff, artists, or paraboriginal or Torres Strait Islander, or any content Aboriginal or Torres Strait Islander histories or compared to the state of the st	engages with
You have selected Aboriginal and Torres Strait Islander people as the primary beneficiaries of this activity, but have selected 'No' for the above question. Please provide an explanation, or return to the 'People' page and select a different primary beneficiary.		
Please provide a brief explanation: *		
Please provide some supporting	information about how you will engage approp	riately with

Please provide some supporting information about how you will engage appropriately with Aboriginal and Torres Strait Islander people and/or cultural content.

You may wish to review the <u>Australia Council for the Arts Protocols for using First Nations Cultural and Intellectual Property in the Arts</u> to guide you.

Examples of evidence may include	Example	les of	evidence	may	incl	lude
----------------------------------	---------	--------	----------	-----	------	------

- A letter of support
- A video testimonial

been undertaken.

Name

- A PDF of email exchanges shared with permission
- Meeting minutes detailing confirmation of participation

Explain how you will engage appropriatel with Aboriginal and	у			
Torres Strait Islande people and/or cultur content? *				
Please upload evider that supports the ab explanation: *		Attach a file	2:	
Working with Child	dren			
Does your project (a any stage) involve working with childre		O Yes Children mea	O ans individuals under t	<b>No</b> he age of 18 years.
Please list the names o this project. For each p (WWCC) and provide do	erson, ide	ntify the stat		ildren at any time during With Children Check
If your application is su personnel listed below,				urrent WWCC details for all
Name	Does this have a cu		WWCC Number	WWCC Expiry Date
			Must be a number.	Must be a date.
Has anyone involved your project underta training in the Natio Child Safety Principl	ken nal	○ Yes	0	No
Please provide the nam	ne of the p	erson involv	ed in your project w	ho has undertaken training

**Evidence** 

in the National Child Safety Principles. Please also upload evidence that the training has

If successful, at least one person involved in this project be required to undertake training in the National Child Safety Principles, **prior to the funding agreement being signed**.

The Australian Human Rights Commission has developed a suite of e-learning modules to help organisations increase their knowledge and understanding of the National Principles and identify steps they need to take as they work towards implementing <u>National Principles</u> for Child Safe Organisations.

There are 11 e-learning modules. They include an introductory module which gives an overview of the development and content of the National Principles, and separate modules on each of the ten National Principles. **Each module will take participants around 20 minutes.** 

The modules are intended to help people working or volunteering in all organisations that engage with children and young people – including organisations of various sizes, across Australia, in all sectors. They provide introductory content as well as links to more detailed resources and practical tools.

These modules are free, and we recommend that you begin completing them now to allow for a quick turnaround should your application be successful.

☐ Lunderstand that I will be required to provide evidence

Access the E-Learning Modules: <a href="https://childsafe.humanrights.gov.au/learning-hub/e-learning-modules">https://childsafe.humanrights.gov.au/learning-hub/e-learning-modules</a>

Please confirm: \*

rease commin	of completed training in the Principles, prior to funding be ☐ I understand that I will be	eing awarded. e required to provide evidence dren Checks for all personnel
Please provide the name of the person who will undertake NSCP training: *		
Vulnerable Persons		
Vulnerable Person means an indi to take care of themselves, or is for any reason, including age, ph influence, or past or existing use	unable to protect themselves ysical or mental illness, traum	against harm or exploitation na or disability, pregnancy, the
Does your project (at any stage) involve working with Vulnerable Persons? *	○ Yes	○ No

If successful, you will be required to provide a Category 37 Australian Federal Police (AFP) check for each person that will be working with vulnerable people. The AFP checks must be no more than 12 months old.

You can apply for an AFP check online or by mail: <a href="https://www.afp.gov.au/what-we-do/national-police-checks">https://www.afp.gov.au/what-we-do/national-police-checks</a>

These checks must be received before the project can commence.

AFP checks cost \$47 per person. This cost can be covered by this grant, please make sure to include it in your budget.

Please list the names of all personnel who will be working with vulnerable persons at any time during this project:

☐ I understand that I will be required to provide AFP checks for each person listed above, prior to funding being awarded.
cants Curriculum Vitae (CV).
Attach a file:  A maximum of 1 file may be attached.

#### Organisation Strategic Plan or CV

Please provide a condensed version of the organisation's strategic plan, or similar document, outlining the experience/calibre of the organisation in the field/s relevant to this application.

Alternatively you may provide the CV of the project lead within the organisation.

Document upload (max.	Attach a file:		
10 pages): *			
	A maximum of 1 file may be attached.		

#### Support Material

Please upload your support material as a combined PDF of no more than 10 pages.

Submitting support material will be of benefit to your application. The assessors will review this support material to help them gain a better sense of your project.

Examples of support material include:

- Artistic support material: Image, text, video or audio examples of the applicant's artistic or cultural work.
- Artist or participant information: Brief bios or CV's for key artists, personnel or collaborators.
- **Letters of support:** Official letters from organisations or individuals expressing their financial or in-kind support for the activity, or explaining how the activity will benefit the applicant, artists, arts professionals, participants, or the broader community.
- Letters of invitation/acceptance: Official acceptance or invitation letters or emails to the applicant from an organisation or individual running an educational program, conference, residency or similar.

Please identify which types of support material you have included: *	<ul> <li>□ Artistic support material (images or text)</li> <li>□ Artistic support material (video or audio)</li> <li>□ Artist/participant information</li> <li>□ Letters of support</li> <li>□ Letter of invitation/acceptance</li> <li>□ Other:</li> </ul>
Upload your support	Attach a file:
material as a combined PDF (max 10 pages) *	A maximum of 1 file may be attached.

Please provide direct links to video or audio support material.

A maximum of three (3) direct links of audio or video (no greater than three minutes in length) can be uploaded.

Description of Link	Website
	Must be a URL.

#### Privacy Statement and Declaration

\* indicates a required field

#### **Privacy Statement**

The information requested in this application form is to be used for the purposes of determining whether or not an individual or organisation is eligible for funding. **Regional Arts Australia and its network of Regional Program Administrators** also uses the information supplied to distribute mail of interest, such as: newsletters, events, and funding opportunities. Applicants that do not wish to be on this mailing list should notify their **Regional Program Administrator** in their state or territory.

**Regional Arts Australia** values your privacy. For details on how we collect, store and use information, you may review our Privacy Policy <a href="https://example.com/here.">here.</a>

The Australian Government stipulates that application details and applicant contact information may be provided to the Australian Government (including the Minister and the Department), Members of Parliament, Regional Arts Australia, and other Regional

Program Administrators (in your state or territory). This will include the applicant's name and location, funded project description, funded amount, state/territory, location, and electorate. This information may be published online and used for promotion and reporting purposes. Regional Arts Australia may also use this information to conduct research so

that we may better understand community needs and can improve service delivery.

#### Declaration

☐ I agree to the above

#### I certify that:

- 1.I have read the Regional Arts Fund guidelines for the program that I am applying to.
- 2.All details supplied in this application and in any attached documents are true and correct to the best of my knowledge.
- 3.I understand the application will not be accepted if it is submitted late or subject to outstanding acquittals.
- 4. That the application has been submitted with the full knowledge and agreement of my organisation/group board.
- 5.I agree that I will contact the Regional Program Administrator in my State or Territory immediately if any information provided in this application changes or is incorrect.
- 6.I understand that all assessment decisions are final.

Name of person ma First Name	king declaration * Last Name
Date of declaration	*
Must be a date.	

#### Feedback

This is the end of the application form.

We would value any feedback you may have regarding our online grants application process. This information will not in any way be used to assess your application.

How was the application process? What worked? How can we improve?

#### Before you submit...

Once you click "Submit" you will not be able to re-open your application form. We advise saving your application form and using the "Download PDF" button on the Review and Submit page to preview your application to make sure everything is correct and that you are happy with the content you are about to submit. Once you are ready, hit "Submit".

Thank you for applying to the Regional Arts Fund.