Regional Arts Fund Quick Response Grant Application

* indicates a required field

Regional Arts Fund Quick Response Grants

Regional Arts Fund Quick Response Grants - up to \$3,000 for Individuals, \$5,000 for Organisations

The Quick Response Grant is provided through the Australian Government's Regional Arts Fund, devolved through Regional Arts Australia and administered in each state by Regional Program Administrators a list of which can be found here

Quick Response Grants are intended to assist regional artists, arts workers, arts organisations and communities to take up professional and skills development opportunities or respond to small project opportunities that arise at short notice.

Activity applied for must commence within 2-12 weeks of the closing date of the round in which the application is submitted.

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 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>

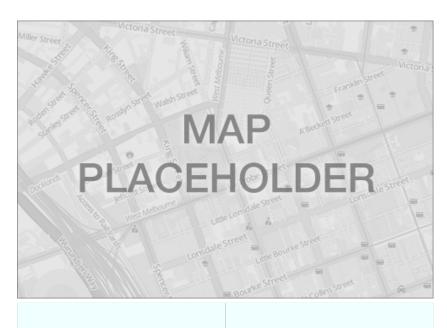
You may only apply for funding from the Regional Arts Program Administrator that represents the state or territory that your ABN is registered in.

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 here

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/Territory? *	0	Yes No

Eligibility

* indicates a required field		
Applicant Eligibility		
Have you received a Quick Response Grant in this financial year? *	○ Yes	○ No
Ineligible Application		
As you have already received a Q eligible to apply in this round.	uick Response Grant in this f	ïnancial year, you are not
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
Ineligible Application		
You are not eligible to apply in thi serious breaches relating to any A territory Regional Program Admin	ustralian Government fundir	
Please complete any relevant acq		tinuing.
Location Eligibility Organisations or individuals b apply for the Regional Arts Fu		tions are not eligible to
Metropolitan organisations or indi community to deliver a project. In community should submit the app	viduals can partner with a re these circumstances, the re	
Please enter your primary address	s below to determine your el	igibility for this funding.
Your primary address must be a phave an ABN, it should match the		
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 www.health.gov.au/resources/apps-and-tools/health-workforce-locator 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 www.health.gov.au/health-workforce/health-workforce-classifications/modified-monash-model.

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.

Ineligible Applicant Type

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 www.health.gov.au/health-workforce/health-workforce-classifications/modified-monash-model.

Please contact the Regional Program Administrator in your State or Territory to discuss your eligibility.

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.		
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		
Your ABN must be registered to you can apply for an ABN, or upon Auspice Required	your name and primary addre	ess.
You will need your application to active ABN.	be auspiced by an individual	who is over 18 and has an
The individual auspicing your to enter into a legally binding Administrator.		
The individual auspicing your apout in the agreement as well as i		
You will be required to enter the Applicant Details section of this f	•	icing your application in the
ABN Details		
Applicant ABN *	The ABN provided will be us	ed to look up the following

entered the ABN correctly.

ABN

Entity name

information. Click Lookup above to check that you have

Information from the Australian Business Register

	L	
	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.	
Does the 'Main business location' listed above match the postcode in your primary address provided? *	○ Yes	O No
Please contact the Australian Buwww.abr.business.gov.au/Help/L		ır details here: https://
Regional Arts Funding can only be ABN 'main business location'.	pe paid to applicants whose p	hysical address matches their
You can submit this form and the will still process your application		r 'main business location'. We
Activity Timing		
When will this activity commence? *	O Within 2 - 6 weeks of the round	e closing date of this grant
	O Within 6 - 12 weeks of the	ne closing date of this grant
	round Chater than 12 weeks from round - ineligible	m the closing date of this grant
	-	
Activities with a critical start dat grant round will be prioritised.	e within 2 - 6 weeks from the	closing closing date of this
Your application may be more co	ompetitive if you apply in a la	ter grant round. Please contact
the Regional Arts Fund Program eligibility. A list of the Regional A	Administrator in your State o	r Territory to discuss your
Activity Eligibility		
Does your activity meet any of the following eligibility criteria? *	☐ This activity has arisen a☐ This activity has an immediate planned for	at short notice nediate need, and is unable to

	\square None of the above		
Briefly describe how your activity meets the eligibility criteria			
selected above: *	immediate need that ari planned for or supported	Guidelines: The program s ses where activity is unab I in other funding rounds, evelopment, skills develop	le to be for example
Ineligible Activity			
The answers to the eligibility que this round of Quick Response Gra		hat your activity is not	eligible for
Please contact the Regional Arts discuss your eligibility. A list of the found here .			
Applicant Details			
* indicates a required field			
Applicant Name			
		act details for the prima tion. All correspondenc sent to this person.	
Applicant *	IndividualOrganisation Name	○ 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 *			
number	Must be an Australian pho	one number.	
Applicant Primary Email			
*	Must be an email address	J S.	
Applicant Primary Website			
	Must be a URL.		
Auspice Information (Indi	vidual)		
an individual over 18 with an acti		ur application must be auspiced by	
		odies, please see clause 7.1 in the	
Regional Arts Fund Guidelines he	<u>re</u> .		
Auspice Contact Name *	First Name	Last Name	
Augnica Contact Primary			
Auspice Contact Primary Email *			
	Must be an email address	S.	
Auspice Contact Primary			
Phone Number *	Must be an Australian pho	one number.	
Auspice ABN *			
Auspice ADII	The ADN provided will b	ha ward to look up the following	
		be used to look up the following kup above to check that you have	
	entered the ABN correc	ctly.	
	Information from the Aus	stralian Business Register	
	ABN		
	Entity name		
	ABN status		
	Entity type	CCT)	
	Goods & Services Tax (G	(ا در	
	DGR Endorsed ATO Charity Type	More information	
	ATO CHarity Type	MOLE HINOLINATION	

ACNC Registration

Tax Concessions Main business location Must be an ABN. **Auspice Contact Primary** Address Address * **Auspice Contact Postal** Address Address * Auspice Information (Organisation) Your answers to the eligibility questions indicate that your application must be auspiced by an organisation that meets the eligibility criteria. For more information about applications from auspice bodies, please see clause 7.1 in the Regional Arts Fund Guidelines here. **Auspice Organisation** Organisation Name Name * **Auspice Organisation**

Must be an email address.

Primary Email *

Auspice Organisation
Primary Phone Number *

Must be an Australian phone number.

Auspice Organisation 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

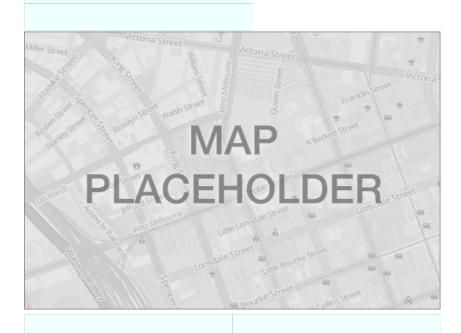
Tax Concessions

Main business location

Must be an ABN.

Auspice Organisation Primary Address *

Address



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

Auspice Organisation Postal Address *

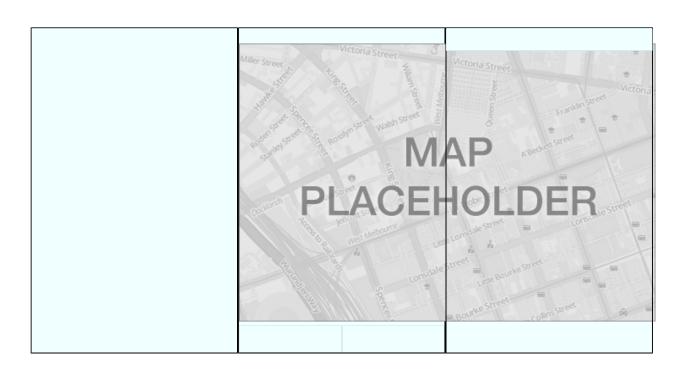
Address

	Address Line 1, Subu Country are required		nce, 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	☐ Youth (25 year and under)	s 🗆 Other:
	Diverse ☐ A person with disability	☐ Would rather not say	
Indigenous or Non-Indige	nous Organisat	ions	
Is the organisation an Indigenous organisation? *	 Indigenous Non-Indigenous Indigenous organisat or more of its Board Islander people. 		
Please select one definition below structured:	v that best describe	s how your Indigen	ous organisation is
Tier 1 - An incorporated Aborigir Indigenous ownership and at lea either:			
 Tier 1a – a Community-cont mandated by its governing ru Tier 1b – not a Community-cont Indigenous ownership and 51 	ules or legislation; ontrolled* organisat	tion but meets the	
Tier 2 - Another organisation, wi control	th at least 50% Indi	genous ownership	or 50% Indigenous
How is your Indigenous organisation structured?	majority Aboriginal a	nd/or Torres Strait Is perated for the bene	ous organisation with lander ownership and fit of Aboriginal and

Applicant's history with the 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 Fund	This is an optional question
Activity Details	
* indicates a required field	
Activity Details	
	Please note, the Activity Title and Activity Description entered below must be suitable for publication. These details will be used to promote your project, if successful. We recommend that the Activity Description is written in the third person and does not contain dots points or lists.
Activity type *	 Arts project Professional development for artists and arts workers Community capacity building project
Activity type * Activity title *	 Professional development for artists and arts workers Community capacity building project
	 Professional development for artists and arts workers
	 Professional development for artists and arts workers Community capacity building project
Activity title *	 Professional development for artists and arts workers Community capacity building project
Activity title *	 Professional development for artists and arts workers Community capacity building project If your application is successful, this will be published publicly. Word count: Must be no more than 250 words.
Activity title * Activity description * What is the main artform of your activity?	O Professional development for artists and arts workers Community capacity building project If your application is successful, this will be published publicly. Word count: Must be no more than 250 words. If your application is successful, this will be published publicly.
Activity title * Activity description * What is the main artform of your activity? *	O Professional development for artists and arts workers Community capacity building project If your application is successful, this will be published publicly. Word count: Must be no more than 250 words. If your application is successful, this will be published publicly.

End Date *	Must be a date.	
	Must be within 12 months fro	om the project start date
Activity Location		
Please list the main project local place (if applicable).	ation, plus any other location	s where your project will take
If your project location does the map to select the locati		s, you can double click on
Visit <u>www.health.gov.au/resour</u> Category of the Project Locatio		orkforce-locator to find the MM
What is the street address of the main project location? *	Address	
	Miller Street & Andrew	MAP Rechert street Wictoria Frankin street Victoria Frankin stree
What is the MM code of the project location? *		
Does your project have outcomes in any other locations? *	○ Yes	○ No
Venue/Location Name	Address Address Line 1, Suburb/Town, State/Province, Postcode, and	MM Category



People

* indicates a required field

Project Personnel & Partners

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

O No

Participants and Partners

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.

Individual or Organisation Name	Participant/ Partner Type	Relationship Type	Status	Evidence of confirmed status
Employment				
Will your activit	ty employ C	Yes		

Please provide employment statistics for your activity, making sure to **include yourself** if relevant.

 \bigcirc No

When selecting the employment status, please note:

people? *

- A short-term employee includes those whose employment includes entitlements.
- An independent contractor includes owners and managers of incorporated and unincorporated businesses, including sole-traders.

Job Title/Role	Employment status	Number of employees
Total employment opportunities:	This number/amount is ca	alculated.
Audience		
Will your activity have an audience? *	○ Yes○ No	
Estimated audience numbers - LIVE *	Must be a number.	
Estimated audience numbers - DIGITAL *	Must be a number.	
How did you calculate these numbers? *		

audience is: *	
	Word count: Must be between 50 and 150 words.
Participants	
Will your activity 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?	 Yes - the Applicant or Project Lead(s) identifies with the primary beneficiary listed above. No - the Applicant or Project Lead(s) do not identify with the primary beneficiary listed above.
any consultation that has helped	with the primary beneficiary group. Provide details of to shape this project, or support for the project from the 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.

:aqiT

- 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.
- Dot point responses are sufficient.
- 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 250 words for each response. 50-100 will be sufficient.

Criterion 1: Impact

communities.	nable economic, social and cultural outcomes in regional		
Please identify the most relevant example/s that will be addressed by your activity: *	 □ Long term outcomes for regional communities □ Demonstrated need for the project in the community □ Creation of opportunities for future arts and cultural activity □ Sustainable economic or social benefits (eg tourism, employment, health and wellbeing, social cohesion, access) 		
How will your activity achieve the Impact outcome/s identified	Much have a reason than 250 wards		
above? * Must be no more than 250 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 the most	 Community support and engagement
relevant example/s that	☐ Financial and project partners
will be addressed by	☐ Level of co-contribution (cash and/or in-kind)
your activity: *	□ Development of networks, collaborations and
	partnerships

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 finar form.	ncial and project partners in the People section of this	
Make sure to detail any cash or i	n-kind contributions in the Budget section of this form.	
Briefly describe how your activity will		
develop networks, collaborations and partnerships: *	Word count: Must be between 50 and 150 words.	
Criterion 3: Reach		
Develop audiences and broaden	community engagement with the arts.	
Please identify the most relevant example/s that will be addressed by your activity: *	 □ Access to social and cultural development opportunities for diverse communities, practitioners, participants and/or audiences □ Opportunities for community members or groups to participate in the arts □ Development of audiences by attracting new attendees/participants or extending their experience of the arts □ Geographical spread of the project 	
	Ensure you have listed all of the project locations in the About your Project section of this form.	
How will your activity		
achieve the Reach outcome/s identified above? *	Must be no more than 250 words.	
	MUSE DE NO MOIE ENANT 230 WOIUS.	
Criterion 4: Opportunity		

Increase employment and professional development opportunities for, and raise the profile of, regional and remote artists.

Please identify the most relevant example/s that will be addressed by your activity: *	 □ Employment opportunities for regional artists or arts workers □ Profile raising of regional artists or arts workers □ Opportunity for an artist to access an exceptional or rare opportunity □ Skills development 	
Ensure you have listed all emplo the People section of this form.	yment opportunities that will be created by your activity in	
How many regional artists or arts workers will have their profile raised through this activity? *	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 250 words.	
Criterion 5: Quality & Viability		
Support quality and viability of artistic and cultural activity.		
Please identify the most relevant example/s that will be addressed by your activity: *	 □ Experience/calibre of the applicant organisation/individual in the relevant field □ Skills, expertise/calibre of the key personnel including participating artists □ Benefits to project participants □ Benefits to audiences, the arts and cultural sector and the Australian community □ Need for funding support 	

Make sure to upload your Curriculum Vitae (CV) or organisational document in the **Support**

Material 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 **Support Material** section of this form.

How	will y	our/	activit	ĽУ
achi	eve ti	ne Qu	uality	_
& Via	ability	y out	come	/s
	tified			

Must be no more than 250 words.

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

Budget

* indicates a required field

Regional Arts Fund Grant Amount Requested

Total Amount Requested

\$

Must be a dollar amount.

Up to \$3,000 for individuals and up to \$5,000 for organisations.

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 Quick Response Grant (this grant) Other grant funding Revenue generated from the project		\$	

sponsorships Other	\$	
Own contribution Fundraising and		

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

Cash Balance - your	\$
budget must equal '0' *	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 - what is being provided?	Source - where is it coming Value of contribution from?	
	Must be a dollar amount	
	\$	
	\$	
	\$	

Total in-kind contributions to your project

Total In-Kind Support	\$
	This number/amount is calculated.
Of the total in-kind support, how much is	\$
the applicant personally contributing?	Must be a dollar amount and at least 0.

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. This data is used for reporting purposes only		

Notes about your budget			
How did you calculate the rates of pay for personnel? *	If there are no personnel being paid, please explain	whv.	
	in chere are no personner being para, prease explain	· · · · · · · · · · · · · · · · · · ·	
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:		
quotes or documents in support of your budget			
calculations:			
Protocols			
* indicates a required field			
Aboriginal and Torres Str	ait Islander People and Cultural Mate	rials	
Does your project involve Aboriginal and/ or Torres Strait Islander people or cultural content? *	O Yes Please answer yes if any project staff, artists, or part Aboriginal or Torres Strait Islander, or any content e Aboriginal or Torres Strait Islander histories or comm	ngages 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 appropriately with Aboriginal and Torres Strait Islander people and/or cultural content.			
You may wish to review the Aust Cultural and Intellectual Property	ralia Council for the Arts Protocols for using First in the Arts to guide you.	: Nations	

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Examples of evidence may include:

A letter of supportA video testimonial

 A PDF of email exc Meeting minutes d 	letailing co	-				
How will you engage appropriately with Aboriginal and Torre Strait Islander peopl	s					
and/ or cultural cont *						
Please upload evider that supports the ab explanation: *		Attach a file				
Working with Chil	dren					
Does your project (a any stage) involve working with childre		O Yes Children mea	ns individuals unde	O No er the ag	ge of 18 yea	ars.
Please list the names o this project. For each p (WWCC) and provide de	erson, ider	ntify the state	•		•	_
If your application is su personnel listed below,				curren	it WWCC o	details for all
Name	Does this have a cu	•	WWCC Number	r	WWCC Ex	xpiry Date
			Must be a number	·.	Must be a	date.
Has anyone involved your project underta training in the Natio Child Safety Principle	ken nal	○ Yes		○ No		
Place provide the par						
in the National Child Sabeen undertaken.			d in your project also upload evide			
in the National Child Sa						

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.

Access the E-Learning Modules: https://childsafe.humanrights.gov.au/learning-hub/e-learning-modules

Please confirm: *	 ☐ I understand that I will be required to provide evidence of completed training in the National Child Safety Principles, prior to funding being awarded. ☐ I understand that I will be required to provide evidence of current Working With Children Checks for all personnel listed above, prior to funding being awarded. 			
Please provide the name of the person who will undertake NSCP training: *				
Vulnerable Persons				
Vulnerable Person means an individual aged 18 years and above who is or may be unable to take care of themselves, or is unable to protect themselves against harm or exploitation for any reason, including age, physical or mental illness, trauma or disability, pregnancy, the influence, or past or existing use, of alcohol, drugs or substances or any other reason.				
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: https://www.afp.gov.au/what-we-do/national-police-checks

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:

Name	
Please confirm: *	☐ I understand that I will be required to provide AFP checks for each person listed above, prior to funding being awarded.
Support Material	
* indicates a required field	
Individual Applicant CV	
Please upload a copy of the appl	icants Curriculum Vitae (CV).
CV Upload (max. 2 pages) *	Attach a file:
Organisation Strategic Plan	an or CV
•	sion of the organisation's strategic plan, or similar nce/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: *	 □ Artistic support material (images or text) □ Artistic support material (video or audio) □ Artist/participant information □ Letters of support □ Letter of invitation/acceptance □ Other:
Upload your support	Attach a file:
material as a combined PDF (max. 10 pages)	

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 here.

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.

I understand and agree that: *

My name and primary address may be provided to Members of Parliament.

Declaration

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 my Regional Program Administrator immediately if any information provided in this application changes or is incorrect.
- 6.I understand that all assessment decisions are final.

Name of person mal 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 w	e 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.