Applicant Eligibility

* indicates a required field

Personal Information

By selecting 'Confirm' below, you confirm that:

- you have read, understood and voluntarily agree to the collection and use of your
 personal information as described in Screen Australia's privacy notice (available on our
 website here) (Privacy Notice); and
- you have informed all individuals whose personal information is to be included in the application form or supporting materials of the matters set out in the Privacy Notice, provided them with a copy (as linked here) and obtained their consent to disclose the relevant personal information to Screen Australia.

Pri	vacy	Notice	*
	Confi	rm	

General Requirements

Before you begin:

- Applicants must provide accurate information to Screen Australia at all times. A person or company that makes a false or misleading statement to Screen Australia in an application may face criminal or civil liability including liability for an offence under the Criminal Code Act 1995. In addition, if funding awarded by Screen Australia was obtained by fraud or serious misrepresentation, Screen Australia can revoke its funding.
- It is important that you read our <u>Terms of Trade</u> and the <u>Screen Industry</u>
 <u>Partnerships Guidelines</u> to ensure your project is eligible for Screen Australia Funding and to help you deliver the strongest application possible.
- For help completing this application, refer to the <u>Help Guide for Applicants</u> or <u>Applicants</u> Frequently Asked Questions (FAQs)

Prior to your submission we recommend you contact the Manager, Festivals and Industry Partnerships to determine eligibility. * □ Please confirm that you have spoken with Dale Fairbairn.
Please confirm: *
riangle the applicant is applying as an Australian company that is incorporated company
carrying on business in Australia, with its central management and control in Australia
□ the applicant and applicant company otherwise meets the general eligibility
requirements set out in Screen Australia's Terms of Trade.
Please also confirm: *
\Box the event is generally (or for new events, intends to be) an annual or regular event such
as a conference or market
□ the event takes place within Australia
☐ funds are not being requested to cover events or activities that have already taken place
☐ funds are not being requested for script or story development, nor for production
activities

\Box the activity is not a	Games event or activ	ity*.	
*Applications for Game Events Fund.	es festivals should be n	nade through the <mark>Gam</mark>	es Festivals and
Do the individual ap company or related (eg, overdue deliver gross proceeds not (AFC, FFC or Film Au	parties have any ou y items or reports, o paid as required) to	tstanding debts or d debts under P+A loa	ontractual obligations n agreements, or
Please provide deta the relevant agency			
Applicant Inform	nation		
* indicates a required	ield		
Applicant Company	Name		
Applicant contact. O	•	ce will be directed t	o this person. *
First Name	Last Name		
Email *			
Must be an email address	5.		
Mobile *			
Marable			
Must be an Australian ph	one number.		
Address * Address			

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

Australian Citizen/R	Resident *
Please select your g	gender: *
to what is indicated on le	gender, which may be different to sex recorded at birth and may be differen egal documents. For examples of different gender terms, please see here (thi A's Gender Equity resources)
Please specify how	you describe your gender: *
Do you identify as a	a First Nations Australian? *
	les a list of language names and the AIATSIS code from the Austlang sit the <u>Austlang Database</u> to see more information about the language
Please select the In	digenous language group/s you identify with:
Hint: If relevant select m	nore than one.
Additional Contact First Name	person if relevant Last Name
Mobile	
Must be an Australian ph	none number.
Email	
Must be an email addres	SS.
Contracting Entit	
Contracting Informa O Individual Organisation Name	ation - Applicant Company Name * Organisation

Email *

Must be an email address.

First Name	Last Name		
Applicant Company	ABN *		
1,1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1,			
	I be used to look up the entered the ABN correct		Click Lookup abo
Information from the A	ustralian Business Register		
ABN			
Entity name			
ABN status			
Entity type			
Goods & Services Tax (GST)		
DGR Endorsed			
ATO Charity Type	More informa	<u>ition</u>	
ACNC Registration			
Tax Concessions Main business location			
Must be an ABN.			
Must be all Abiv.			
Role *			
Address *			
Address			
Address Line 1, Suburb/	Town, State/Province, Post	code, and Country are re	quired.
Phone *			
Must be an Australian p	hone number.		

Activity Summary
* indicates a required field
Name of activity *
Total budget *
\$
Must be a dollar amount.
How many years of funding are you requesting in this application? *
Amount Requested Year 1 *
Must be a dollar amount. What is the amount (in dollars only) of the total requested funds committed in the first year?
Amount Requested Year 2 *
Must be a dollar amount. What is the amount (in dollars only) of the total requested funds committed in the second year
Amount Requested Year 3 *
Must be a dollar amount. What is the amount (in dollars only) of the total requested funds committed in the third year?
Total amount requested *
\$
This number/amount is calculated. The total financial support you are requesting in this application
Please provide a statement of your event's intent or purpose *

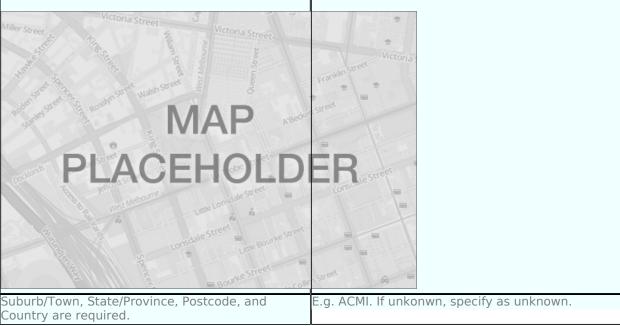
Word count:

Must be no more than 500 words.

Please provide a timeline/schedule for producing the activity/event.

Schedule Item	Date
Announcement date	
Date activity commences	
Date activity concludes	
Delivery of report	
Announcement date	
Date activity commences	
Date activity concludes	
Delivery of report	
Announcement date	
Date activity commences	
Date activity concludes	
Delivery of report	
Announcement date	
Date activity commences	
Date activity concludes	
Delivery of report	
	Must be a date.

Activity Location Activity Venue



Estimated number of people expected to attend the activity

- <50
- O 50-99
- O 100-499
- O 500-999
- O 1000+

Briefly describe the type of activity *

Word count: Must be between 40 and 100 words.		
Describe how the activity is inclusive; both in terms of participants and also the organisers and presenters. *		
What are the primary areas of focus for this project/program?		
You can select items from any area of the list – all have equal value. Only select sub-categories if you want to be more specific. In this question we want to know about the field of work (e.g. arts, sport, health), rather than the types of people it will affect (e.g. young people, refugees)		
Submission Materials		
* indicates a required field		
You will need to provide the supporting materials listed below in order to finalise and submit your application.		
Files can be added using the 'Choose Files' button.		
Please ensure every attachment uploaded is named according to the filename instructions given. If you are uploading multiple files for one question, please number them to indicate sequence.		
Please only upload information that relates to the question being asked; do not combine materials into one document. ZIP files are not accepted. Maximum file size 25MB.		
Note: Additional materials may be requested.		
Please describe the quantifiable outcomes of the activity (KPIs). Use the 'Add More' button to add additional rows.		
KPI Description KPI Target		

Please upload an **Activity Plan -** The actual plan outlining the details of the activity which may include speakers, panelists and facilitators, proposed participants and/or audience including any regional outreach, and the selection process where applicable.

Activity Plan *
Attach a file:

Filename: Activity Plan - [Activity Name].dox, .docx or .pdf

Please provide a 2/3-year Strategic Business Plan.

A Strategic Business Plan should include:

- a statement of the event's intent or purpose
- forward plan outlining the event's adaptability to changes in industry practices
- an executive summary
- mission statement
- specific plans for the festival
- intended outcomes or KPIs (should be quantifiable)
- financials
- marketing plans
- governance and operations
- access and inclusion strategy

2/3-year Strategic Business Plan *

Attach a file:

Filename: [2/3]-Year Strategic Business Plan - [Activity Name].doc, .docx or .pdf

Budget

A detailed Budget for the event. Please include actuals from the event's previous year's budget (if applicable) against the forecasts in this application. *

Attach a file:

Filename: Budget - [Activity Name].doc, .docx or .pdf

Substantiating documentation for the budget *

Attach a file:

Filename: Substantiating Documentation - [Activity Name].doc,.docx or .pdf

Accounts: The most recent set of audited and un-audited annual accounts for the applicant's organisation or business *

Attach a file:

Filename: Accounts - [Activity Name].doc, .docx or .pdf

Company Statement

Background information about the applicant organisation and the experience and skills of relevant personnel to effectively run the activity.

Company statement *			
Attach a file:			
Filename: Company Statement - [Activity Name].d	oc. docy or ndf		
rhename. Company Statement - [Activity Name].u	oc, labex of .pdf		
Your application files - It is essential you manner for successful ingestion to our a confirm: *			
 every file uploaded is named according to the filename instructions given. if multiple files have been uploaded for one question, they are numbered to indicate 			
sequence. uploaded files are the specified format and no ZIP files are included. At least 3 choices must be selected.			
Diversity Information			
* indicates a required field			
Please note this section doesn't form part of yotherwise stated in your funding program's grinformation click 'prefer not to disclose'.			
Please be advised Screen Australia Staff may use this information for the purposes of preparing and publishing aggregated research and reporting. For more information, please refer to <u>Screen Australia's Seeing Ourselves report</u> . All personal information will be handled in accordance with our <u>Privacy Policy</u> .			
Please complete for the applicant			
If you are completing this section for someone else, please ensure you have their permission or alternatively request the individual to fill in this section.			
Please select the Applicant's role *	Does the Applicant have a disability? *		
Is the Applicant from a culturally or linguistically diverse background? *	Does the Applicant identify as LGBTQI+? *		
Please select the Applicant's cultural background/ethnicity:	'LGBTQI+' refer to lesbian, gay, bisexual, transgender/gender diverse, queer and intersex - the '+' recognises that LGBTQI doesn't include a range of other terms that people identify with, or use to describe themselves. We acknowledge		
Please select the Applicant's first language (as a child). If Indigenous, go to the next question.	that one acronym or description may be not able to fully capture the diversity of gender identities, sexual orientations and bodily diversity in our community, and that language is constantly evolving. Our intention is to be as succinct as we		

can, but inclusive of all.