## **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 <a href="here">here</a>) and obtained their consent to disclose the relevant personal information to Screen Australia.

Pri	vacy	<b>Notice</b>	*
	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>Industry Partnerships</u> <u>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)

Ind	ior to your submission we recommend you contact the Manager, Festivals and dustry Partnerships to determine eligibility. * Please confirm that you have spoken with Dale Fairbairn.
000	An industry organisation, OR A state or territory agency, OR
0	A screen resource organisation.

# Please also confirm: \* ☐ The activity that is the subject of this application is new, original and inclusive ☐ Funds are not being requested retrospectively ☐ Funds are not being requested for script or story development, nor for production activities ☐ The applicant and applicant company meet the general eligibility criteria in Screen Australia's Terms of Trade.

riteria. Please confirm: \* ☐ The applicants are currently not in receipt of funding for a similar initiative through any of the Enterprise programs. Do the individual applicants, key creatives named in the application, applicant company or related parties have any outstanding debts or contractual obligations (eg, overdue delivery items or reports, debts under P+A loan agreements, or gross proceeds not paid as required) to Screen Australia or its predecessors? (AFC, FFC or Film Australia) \* Yes  $\bigcirc$  No Please provide details of outstanding debts or contractual obligations including the relevant agency (Screen Australia, AFC, FFC, Film Australia). \* Applicant Eligibility Statements The Individual Applicants undertake that (please tick to confirm): \* ☐ they are Australian citizens or residents; ☐ they are not enrolled full-time in a film, television or interactive digital media course at a film school or other tertiary educational institution;  $\Box$  they are not employees of a broadcaster. At least 3 choices must be selected. Applicant Company and Individual Applicant Eligibility Statements Both the Applicant Company and (if applicable) Individual Applicants undertake that (please tick to confirm): \* ☐ they will always act 'in good faith' in all their dealings with Screen Australia; □ they have the capacity and resources to carry out the project that is the subject of the

they have the capacity and resources to carry out the project that is the subject of application;

 $\Box$  they have the right to carry out the project that is the subject of the application (including any relevant copyright and clearances);

 $\Box$  they have meaningful creative control of the project that is the subject of the application.

the Applicant Company is incorporated in Australia, carries on business in Australia, and has its central management and control in Australia

 $\Box$  the Applicant Company is not a broadcaster, holding company or subsidiary of a broadcaster, or a company jointly owned by a broadcaster or holding company/subsidiary of a broadcaster.

At least 6 choices must be selected.

## **Applicant Information**

\* indicates a required field

Applicant Company Name	
Applicant contact. Official correspondence will be direct First Name  Last Name	ed to this person. *
Email *	
Must be an email address.	
Makila w	
Mobile *	
Must be an Australian phone number.	
·	
Address * Address	
Address	
Address Line 1, Suburb/Town, State/Province, Postcode, and Country a	are required
Address Line 1, Suburb/Town, State/Hovince, Fostcode, and Country 6	ne required.
Australian Citizen/Resident *	
Please select your gender: *	
Gender refers to current gender, which may be different to sex record to what is indicated on legal documents. For examples of different ger link will take you to NAVA's Gender Equity resources)	
Please specify how you describe your gender: *	
riease specify flow you describe your gender.	
Do you identify as a First Nations Australian? *	

The below field provides a list of language names and the AIATSIS code from the Austlang Database. You can visit the <u>Austlang Database</u> to see more information about the language/s you are selecting.

Please select the In	digenous l	anguage g	jroup/s you	identify with:
Hint: If relevant select m	ore than one			
Are you from a cultu	ırally or liı	nguisticall	y diverse b	ackground? *
Please select your c	ultural ba	ckground/	ethnicity: *	
If relevant select more th	nan one.			
What was your first	language	as a child?	? *	
Do you have a disab	oility? *			
Please specify:				
Additional Contact prirst Name	Last Name			
Mobile				
Must be an Australian ph	one number.			
Email				
Must be an email addres	S.			
Contracting Entity	У			
Contracting Informa O Individual Organisation Name	ntion - App ○ Organisa		npany Name	<b>3</b> *

First Name	Last Name		
Applicant Company	ADN *		
Applicant Company	ADN		
The ABN provided will	be used to look up the	following information.	Click Lookup above to
check that you have er			
Information from the Aus	stralian Business Register	-	
ABN			
Entity name			
ABN status			
Entity type			
Goods & Services Tax (G	ST)		
DGR Endorsed			
ATO Charity Type	More informa	ation at ion	
ACNC Registration			
Tax Concessions			
Main business location			
Must be an ABN.			
Role *			
Address *			
Address			
Address Line 1, Suburb/T	own, State/Province, Post	code, and Country are re	quired.
Phone *			
lione			
Must be an Australian pho	one number.		
Email *			
Must be an email address			

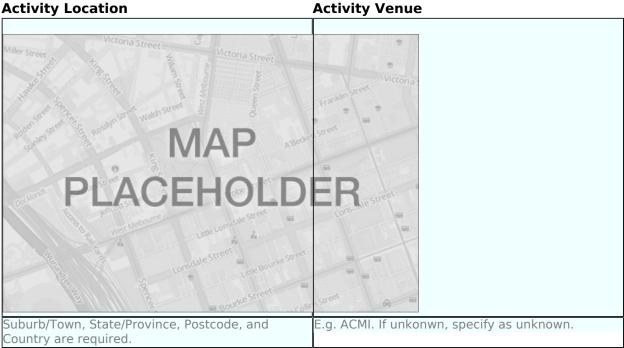
# **Activity Summary**

\* indicates a required field

Name of	activity *	

Schedule Item	Date
	Must be a date.

## **Activity Location**



## 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; borganisers and presenters. *	ooth in terms of parti	cipants and also the
organisers and presenters.		
What are the primary areas of focus for	this proiect/progran	1?
You can select items from any area of the list – a want to be more specific. In this question we war health), rather than the types of people it will affo	it to know about the field o	of work (e.g. arts, sport,
Total amount requested *		
\$		
Must be a dollar amount. What is the total financial support you are reques	sting in this application?	
Total budget *		
\$		
Must be a dollar amount.		

## **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** 

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.
*
Attach a file:
Actually a file.
Filename: Activity Plan - [Activity Name].dox, .docx or .pdf
Budget
The budget including the Screen Australia ask. *
Attach a file:
Filename: Budget - [Activity Name].doc, .docx or .pdf
Thename. Budget - [Activity Name].doc, .docx or .pur
Substantiating documentation for the budget *
Attach a file:
Filename: Substantiating Documentation - [Activity Name].doc,.docx or .pdf
Company Statement
Company Statement
Background information about the applicant organisation and the experience and skills of relevant personnel to effectively run the activity.
Company statement *
Company statement *
Attach a file:
Filename: Company Statement - [Activity Name].doc, .docx or .pdf
Your application files - It is essential your files are named in the prescribed
manner for successful ingestion to our automated systems. Please tick to
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.
At least 5 choices illust be selected.
Diversity Information

Please note this section doesn't form part of your application and is not assessed unless otherwise stated in your funding program's guidelines. If you do not wish to provide this information 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 <a href="Screen Australia's Seeing Ourselves report">Screen Australia's Seeing Ourselves report</a>. All personal information will be handled in accordance with our <a href="Privacy Policy">Privacy Policy</a>.

#### 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+? *  'LGBTQI+' refer to lesbian, gay, bisexual,
Please select the Applicant's cultural background/ethnicity:	transgender/gender diverse, queer and interse - the '+' recognises that LGBTQI doesn't includ a range of other terms that people identify wit 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
If first language is an Indigenous language, please select from AIATSIS Austlang Database:	can, but inclusive of all.