### **Program 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 <a href="here">here</a>) (**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	ivacy	Notice	*
	Confi	rm	

### General Requirements

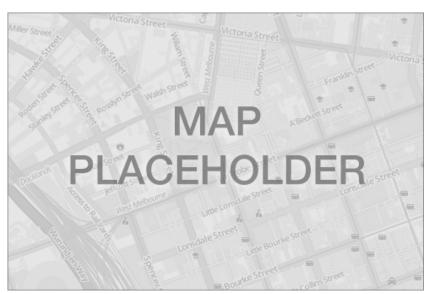
**BTL Next Step** is a credit springboard and career accelerator program to support established mid-career below-the-line (BTL) practitioners to step up into senior crew and leadership roles that have been identified as experiencing shortages.

#### 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>, the <u>BTL Next Step Guidelines</u> and the <u>BTL Next Step FAQs</u> to ensure you are eligible for 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>Applicant Frequently Asked Questions (FAQs)</u>
- For queries about the guidelines, deadlines, or questions in the form, please contact us on 1800 507 901 during business hours or email industrydevelopment@screenaustralia.gov.au and quote your application number

Please confirm that the applicant company *
☐ is a production company or screen business
☐ is able to provide opportunities for mid-career practitioners in the ten identified roles*
☐ meets the general eligibility criteria in Screen Australia's Terms of Trade.
*The ten identified roles are: 1st Assistant Director, Art Director, Editor, Line Producer, Location
Manager, Post Production Supervisor, Production Accountant, Production Manager, Sound Designer,
Special Effects (SFX) Supervisor.
Please confirm that the opportunity to be provided by the applicant company is:
work on a project or projects already approved for Screen Australia production funding
(for any genre type), or

scale and well known t	o Screen Australia, and	g Screen Australia production funding but of d/or ion company with a strong and reputable trac
☐ funding is not bein Screen Australia, state ☐ funding is not bein	g requested to fund or g requested for profess	
Applicant Company	Name - For Contract	ing *
Applicant Detail	S	
* indicates a required	field	
Applicant Details		
This person takes resp directed to them.	onsibility for the applic	cation and all official correspondence will be
Applicant * First Name	Last Name	
i ii se ivame	Last Warne	
<b>Applicant Primary A</b> Address	ddress *	



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

#### **Applicant Primary Phone Number**

Must be an Australian phone number.

### Applicant Primary Email \*

Must be an email address.

## **Applicant Company Details**

#### **Applicant Company 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.

Please COPY & PASTE the ENTITY NAME from the ABR lookup above into Applicant Company field below. These fields must be identical.

<b>Applicant Company</b> Organisation Name	*		
<b>Applicant Company</b> Address	Primary Address *		
Address Line 1, Suburb/To	own, State/Province, Posi	code, and Country are re	quired.
Applicant Company	Primary Phone Num	ber *	
Applicant Company	Primary Email *		
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	,		
Additional Contac	t (if applicable)		
Additional Contact			
First Name	Last Name		
Additional Contact P	rimary Phone Numb	er	
Must be an Australian pho	one number.		
<b>Additional Contact P</b>	rimary Email		
Must be an email address	5.		
Opportunity Det	ails		
* indicates a required f	ïeld		
Provide a brief desc that will be included			
Word count: Must be no more than 20	0 words		

orincipals and key sta	ff. *	
Provide a brief descrip supervised. *	otion of any other placement	s that the company has
Project Details		
	s for the production or slate of pr vided should your application be oduction.	
Placements must star	t after May 12, 2025.	
Project Title *	Anticipated placement cost *	Roles Available (select all that apply) *
,	\$	☐ 1st Assistant Director ☐ Art Director
	Must be a dollar amount.	<ul><li>☐ Editor</li><li>☐ Line Producer</li></ul>
ogline / short synopsis *	Number of production weeks *	Location Manager     Post Production Supervisor     Production Accountant     Production Manager     Sound Designer
Senre(s) *	Must be a number.	☐ Special Effects (SFX) Supervisor
		Weekly rate *
	Length of opportunity (weeks) *	\$
Production location *		Must be a dollar amount.
Address	Must be a number.	Any other costs (e.g. fringes) *
	Estimated placement start date *	\$
		Must be a dollar amount.
Pre-production start date *	Must be a date and no earlied than 12/5/2025.	r
	Placement end date *	
Must be a date.		
Production end date *	Must be a date.	
Must be a date.		
	or received production fundir	ng from Screen Australia for
of the above projects? ○ Yes	○ * ○ No	

Please provide deta include the applicat		ia funding applied fo	or/received. Please
including any policie people; people who people who are Dear	es or initiatives that are from culturally a f/deaf or disabled; w ple who identify as	ment to diversity, ed support employees and linguistically div omen, people who a LGBTIQ+; and people	who are First Nations erse backgrounds; are non-binary or
Examples include:			
<ul> <li>Existing company strategies and policies around diversity, equity and inclusion</li> <li>Identify company-wide training needs that support increased diversity, equity and inclusion i.e. Disability Confidence training, Cultural Safety Training, Mental Health Awareness, Inclusive Workplace Training.</li> <li>Previous initiatives or productions that have benefited from and contributed to equity and inclusion.</li> </ul>			
Mentor			
Please provide the of the Placee as part of Add More to add a n	f the opportunity be		production(s). Click
Name			
First Name	Last Name		
Role			
Primary Phone Num	ber		
Must be an Australian ph	one number.		
Primary Email			
Must be an email address	5.		

## **Budget Summary**

\* indicates a required field

Please provide a budget summary detailing how the Screen Australia grant will be spent

Budget Item	Screen Australia Ask (\$)	Other Funding (\$)
	Must be a dollar amount.	Must be a dollar amount.
	\$	\$
	\$	\$
	\$	\$

Screen Australia ASK Total *
\$
This number/amount is calculated.
Other Funding Total
\$
This number/amount is calculated.

Please provide your full detailed budget using Screen Australia's <u>Skills</u> Development, Training and Inclusive Placements Budget Template.

Full Budget * Attach a file:	
Filename: BTL Next Step Budget - [Host Compar	ny Name].xlsx

### **Submission Materials**

\* indicates a required field

Files can be added using the 'Choose Files' button.

Please ensure:

- Every file uploaded is named according to the filename instructions given
- Only upload information that relates to the question being asked
- Uploaded files are in the specified format and no ZIP files are included
- Maximum file size is 25MB

Please note: If you have supplied more than the requirement, we will only read/ watch up to the maximum page/duration limit.

Additional supporting materials: Any other documentation or supporting material that might assist consideration of the application.

Attach a file:

Filename: [Type of Document] - [Applicant Company Name].doc, .docx, .pdf or .xlsx. If uploading multiple files, please number each.
Please ensure you have provided all the attachments requested before submitting
To ensure your files can be ingested into our automated systems, and that your application can be processed, please confirm: *  □ Every file uploaded is named according to the filename instructions given  □ Uploaded files are in the specified format and no ZIP files are included  □ Uploaded files are no more 25MB