

REGIONAL ARTS DEVELOPMENT FUND (RADF) APPLICATION FORM

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APPLICATION SUMMARY

APPLICANT NAME			
RADF CATEGORY FOR FUNDING Please tick one category which has the most relevant goals for your application. Check the RADF guidelines for applicants for details	<input type="checkbox"/> Individual development <input type="checkbox"/> Projects and programs <input type="checkbox"/> Community wellbeing <input type="checkbox"/> Local priorities and strategic initiatives		
NAME OF PROJECT	Note: Must be a maximum of 6 words		
BRIEF DESCRIPTION OF PROJECT Describe in approximately 20 words (what is it about?)			
TOTAL PROJECT COST (USE WHOLE \$)	\$	RADF GRANT REQUESTED	\$
START DATE		FINISH DATE	
OUTCOME REPORT DATE			
COUNCIL USE ONLY			
RADF GRANT	<input type="checkbox"/> Approved <input type="checkbox"/> Not Approved	MEETING DATE	
AMOUNT REQUESTED	\$	AMOUNT APPROVED	\$
CHAIRPERSON AUTHORISATION	Signature		Date
	Print Name		

APPLICANT DETAILS

1.1 APPLICANT TYPE			
ARE YOU APPLYING AS: (please tick one only)	<input type="checkbox"/> An Individual	<input type="checkbox"/> Group/Unincorporated Body	<input type="checkbox"/> An Organisation
	Go to 1.2	Go to 1.3	Go to 1.4

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1.2 INDIVIDUAL

Please insert your full name (as per driver's licence or birth certificate). If under 18, give date of birth

TITLE	<input type="checkbox"/> Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Ms <input type="checkbox"/> Miss <input type="checkbox"/> Other (please specify)
GIVEN NAMES	
FAMILY NAME	
DATE OF BIRTH	
ARE YOU:	<input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Other (please specify) Go to 1.5
DO YOU HAVE AUSTRALIAN CITIZENSHIP OR PERMANENT RESIDENCY STATUS?	<input type="checkbox"/> Yes <input type="checkbox"/> No

1.3 GROUPS

Collectives or cooperatives are community groups or groups of artists that are not incorporated but must be auspiced by an incorporated organisation, local government, or an individual with an ABN. One person must be nominated as the accountable representative of the collective for management, reporting and financial matters.

NAME OF GROUP	
NAME OF AUSPICING ORGANISATION /INDIVIDUAL Note this organisation or individual must complete section 1.8	
DETAILS OF ACCOUNTABLE PERSON IN APPLICANT GROUP	<input type="checkbox"/> Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Ms <input type="checkbox"/> Miss <input type="checkbox"/> Other (please specify)
	Given Names
	Family Name
	Role of Accountable person Go to 1.5

1.4 ORGANISATIONS

Eligible organisations include arts and cultural not-for-profit organisations and Australian companies that are either based in Queensland or able to demonstrate how their project will directly benefit Isaac arts and culture.

Organisations must be registered under law as either incorporated associations or a company.

LEGAL NAME OF ORGANISATION	
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DETAILS OF ACCOUNTABLE PERSON IN ORGANISATION	<input type="checkbox"/> Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Ms <input type="checkbox"/> Miss <input type="checkbox"/> Other (please specify):	
	Given Names	
	Family Name	
	Role of contact person	
WHAT IS YOUR ORGANISATION'S STATUS?	<input type="checkbox"/> Incorporated Association <input type="checkbox"/> Company	
1.5 APPLICANT CONTACT DETAILS		
STREET ADDRESS		
POSTAL ADDRESS		
PHONE NUMBER	Work	Mobile
EMAIL ADDRESS		
SOCIAL MEDIA		
WEBSITE ADDRESS		
1.6 RADF AND OTHER GRANTS		
HAVE YOU OR YOUR GROUP/ORGANISATION PREVIOUSLY APPLIED FOR A RADF GRANT?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
IF YOU WERE SUCCESSFUL, HAS THAT RADF GRANT BEEN SUCCESSFULLY ACQUITTED?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
HAVE YOU OR DO YOU INTEND TO APPLY FOR OTHER GRANTS TO FUND ANY ACTIVITIES IN THIS PROJECT?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
If yes, list the other grants that have or will be applied for including the financial amount and whether the outcome is known.		
1.7 AUSTRALIAN BUSINESS NUMBER (ABN) DETAILS		
WILL YOU/YOUR ORGANISATION BE RESPONSIBLE FOR THE FINANCIAL	<input type="checkbox"/> Yes – insert your ABN details below	

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MANAGEMENT OF THE GRANT IF THIS APPLICATION IS SUCCESSFUL?	<input type="checkbox"/> No - An auspicing body will be administering any grant that I receive on my/our organisation's behalf. Complete section 1.8 below
WHAT IS YOUR ABN?	
IN WHAT NAME IS THE ABN REGISTERED?	
WHAT IS YOUR TRADING NAME OR PROFESSIONAL NAME (IF RELEVANT)?	
ARE YOU REGISTERED FOR GST?	<input type="checkbox"/> Yes <input type="checkbox"/> No

1.8 AUSPICED APPLICATION

Please note: All individuals who do not have an ABN, groups/collectives or unincorporated organisations must nominate an individual with an ABN or incorporated organisation to take responsibility for any grant that may be offered. Only complete this section if you are nominating an accountable organisation or individual to administer the grant on your behalf who will also be responsible for submitting a financial report at the end of the project.

WHO IS YOUR AUSPICING ARRANGEMENT WITH?	<input type="checkbox"/> an incorporated organisation <input type="checkbox"/> an individual with an ABN
NAME OF AUSPICING ORGANISATION OR INDIVIDUAL	
CONTACT PERSON FOR AUSPICING ORGANISATION	<input type="checkbox"/> Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Ms <input type="checkbox"/> Miss <input type="checkbox"/> Other (please specify):
	Given Names
	Family Name
	Role of contact person
ABN OF AUSPICING ORGANISATION OR INDIVIDUAL	

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POSTAL ADDRESS OF AUSPICING ORGANISATION OR INDIVIDUAL	
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TELEPHONE	Work	Mobile
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EMAIL ADDRESS	
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PLEASE COMPLETE CERTIFICATION OF AUSPICING ORGANISATION/INDIVIDUAL DETAILS. GO TO 5.2

ABOUT THE PROJECT

2.1 PROJECT ARTFORM

WHAT IS THE MAIN ART FORM CATEGORY OF YOUR PROJECT? PLEASE SELECT ONE ONLY FROM THE LIST.	<input type="checkbox"/> Dance	<input type="checkbox"/> Community Arts and Cultural Development
	<input type="checkbox"/> Multi-arts	<input type="checkbox"/> Heritage
	<input type="checkbox"/> Theatre	<input type="checkbox"/> Music
	<input type="checkbox"/> Writing	<input type="checkbox"/> Visual arts, craft and design

2.2 ACTIVITIES PLANNED FOR THIS PROJECT

CHOOSE FROM THE LIST:		Insert the number of activities:
	<input type="checkbox"/> Individual artist participating in professional/career development activity	
	<input type="checkbox"/> Creative development of new work	
	<input type="checkbox"/> Performances	
	<input type="checkbox"/> Exhibitions/Collections	
	<input type="checkbox"/> Publications	
	<input type="checkbox"/> Workshops	
	<input type="checkbox"/> Events/Festivals	
	<input type="checkbox"/> Place making	
	<input type="checkbox"/> Cultural tourism	
	<input type="checkbox"/> Community consultation/arts research/policy development	
<input type="checkbox"/> Conferences and training sessions delivered for artists and cultural workers		

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<input type="checkbox"/> Heritage protection/promotion	
<input type="checkbox"/> RADF training	
<input type="checkbox"/> RADF promotion	
<input type="checkbox"/> Other (please specify)	

2.3 COMPLETE THE TABLE BELOW IF THE APPLICANT IS SEEKING FUNDING FOR INDIVIDUAL DEVELOPMENT

THROUGH UNDERTAKING THIS INDIVIDUAL DEVELOPMENT OPPORTUNITY, I WILL (PLEASE TICK ONE OR MORE OPTIONS THAT APPLY):	<input type="checkbox"/> Develop new skills and knowledge
	<input type="checkbox"/> Explore new directions in my arts or cultural practice
	<input type="checkbox"/> Take my career to the next level of professionalism
	<input type="checkbox"/> Develop new professional industry networks
	<input type="checkbox"/> Develop new audiences or markets
	<input type="checkbox"/> Contribute to my local community through sharing what I have learnt with others. Detail how you will do this:
<input type="checkbox"/> Other benefits expected to flow to the individual applicant. Please specify below:	

2.4 DOES THIS APPLICATION ADDRESS LOCAL COUNCIL PRIORITIES?

(TICK IF ONE OR MORE APPLIES)	<input type="checkbox"/> Community Resilience
	<input type="checkbox"/> Local Content/Local Product
	<input type="checkbox"/> Place-making
	<input type="checkbox"/> Lifelong Learning

2.5 DOES THIS APPLICATION ADDRESS ONE OR MORE OF THE STATE GOVERNMENT PRIORITIES LISTED IN THE TABLE BELOW

(TICK IF ONE OR MORE APPLIES)	<input type="checkbox"/> Safeguarding Our Health
	<input type="checkbox"/> Supporting Jobs
	<input type="checkbox"/> Backing Small Business

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- Making It For Queensland
- Building Queensland
- Growing Our Regions
- Investing In Skills
- Backing Our Frontline Services
- Protecting The Environment

2.6 WRITE A BRIEF DESCRIPTION OF WHAT YOU WANT TO DO WITH THE PROJECT

Describe its rationale and objectives. Refer to the relevant category of funding in the RADF guidelines for applicants.

2.7 EXPLAIN WHY THIS PROJECT SHOULD BE SUPPORTED

How will this project benefit you, your community or artists/arts workers or cultural workers? Write a brief description about the results you expect from the project. E.g. skill development, community access, media coverage for your art form, professional development, innovation, creation of new work, quality of life for the community.

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2.8 WHAT EVIDENCE OF GENUINE COMMUNITY INTEREST AND LOCAL SUPPORT IS THERE FOR THIS PROJECT?

Briefly describe evidence of interest in and support for your project (not necessary for category 1 applications) demonstrate the level of support by attaching letters and supporting documents.

2.9 LOCATION OF PROJECT

WHERE WILL YOU UNDERTAKE YOUR PROJECT?		POSTCODE(S) WHERE ACTIVITY WILL TAKE PLACE:	
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2.10 ESTIMATED TOTAL NUMBER OF PARTICIPANTS AND AUDIENCES

	From Isaac region:	From outside Isaac region:
PARTICIPANTS (Number of people who actively participate in activities - e.g. Attend a class to make something, sing in a choir, participate in a training workshop)		
ATTENDEES (Number of people who attend activities as audience members - e.g. To see an exhibition, watch a performance, listen to a talk, etc.)		

2.11 HAVE YOU CONSIDERED THE ISSUES OF WORKPLACE HEALTH AND SAFETY, COPYRIGHT AND LICENCES REQUIRED FOR YOUR PROJECT

Please outline the steps you have taken to address these issues. For example, identify possible risks with this project and outline the strategies to minimise them. Specify any licences that are required to undertake the activity or if permission from copyright holders is required.

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2.12 PUBLIC LIABILITY INSURANCE POLICY FOR THIS PROJECT

Insert the details of the policy that will cover this project

POLICY HOLDER NAME	
POLICY NO.	Expiry Date:
NAME OF INSURER	
AMOUNT OF INSURANCE COVERAGE	\$
OR, DETAILS OF OTHER ARRANGEMENTS	

2.13 HOW WILL AUDIENCE/PARTICIPANT/PARTNER FEEDBACK BE COLLECTED FOR THIS PROJECT?

TICK ONE OR MORE THAT APPLIES	<input type="checkbox"/> Survey
	<input type="checkbox"/> Feedback forms
	<input type="checkbox"/> Interviews
	<input type="checkbox"/> Stakeholder debrief
	<input type="checkbox"/> Other. Please insert details below:

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SECTION 3 – PROJECT MANAGEMENT

3.1 LIST EACH STAGE OF THE PROJECT FROM START TO FINISH

Write a date in the column beside each stage to indicate when you expect to complete that stage of the project.

PROJECT STAGE	Date

COMPLETE THE RADF PROJECT OUTCOME REPORT (NO LATER THAN 8 WEEKS AFTER THE FINISH DATE)

3.2 NUMBER OF ARTISTS, ARTS WORKERS AND VOLUNTEERS INVOLVED IN THE PROJECT

INSERT NUMBER OF PEOPLE TO BE EMPLOYED (ON CONTRACT OR PERMANENT BASIS) AS ARTISTS OR ARTS AND CULTURAL WORKERS OVER DURATION OF ACTIVITY/PROJECT	
INSERT NUMBER OF PEOPLE EMPLOYED OVER DURATION OF ACTIVITY (ON CONTRACT OR PERMANENT BASIS) ENGAGED IN A ROLE OTHER THAN AN	

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ARTISTIC/CULTURAL ROLE ONE	
INSERT NUMBER OF PEOPLE TO BE ENGAGED AS VOLUNTEERS TO SUPPORT DELIVERY OF THE ACTIVITY/PROJECT	

3.3 LIST THE ARTISTS, AND ARTS/CULTURAL WORKERS INVOLVED

You must demonstrate that award rates or industry recommended rates of pay will be made to arts and cultural workers involved in the project. If you are paying only a portion of the recommended rate of pay because the professionals involved are contributing their time as an in-kind contribution, please list the total rate of pay in the table below and then note any in-kind contribution on the income section of the budget (please attach an extra page if necessary).

Please attach the following documents from each listed artist or arts worker employed with RADF funding:

- Resume or cv
- Eligibility checklist for each professional and emerging professional artist
- Letter of confirmation of availability
- Schedule of fees/quote

NB: INSERT THE RELEVANT AMOUNTS IN ITEM A OF BUDGET.

Name	Role or position in project	Rate of pay (\$/hr or \$/wk)	\$ Total fee	Sum to be funded by RADF

3.4 LIST ANY PARTNERSHIPS INVOLVED IN THIS PROJECT INSERT THE RELEVANT AMOUNTS IN ITEM I OF BUDGET.

Name of organisation/ individual	Description of Contribution	Type of Partnership Financial or In-kind	Value of Sponsorship (whole \$)

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3.5 PROJECT BUDGET – INCOME AND EXPENSES

Complete this budget using this template to account for all costs of your project. You must:

- Ensure that the total expenditure equals the total income;
- Ensure that your budget estimates are as accurate as possible;
- Indicate how much of the RADF grant will be used for each relevant item. Write the breakdown in the column on the right-hand side of the expenditure column;
- Enter all other grants for which you have applied, and mark approved grants with an asterisk;
- Assign a \$ value to in-kind support such as volunteer labour. It is usual to cost volunteer labour at \$20 per hour;
- Round all amounts to the nearest dollar (e.g. \$10, not \$9.87 or \$458 not \$458.21).

Note. If you are not GST registered, amounts should be shown as inclusive of GST as this is part of the cost of the project. If you are registered for GST, amounts should be shown as exclusive of GST as council will pay the amount of the grant plus GST.

EXPENDITURE (IS THE TOTAL COST OF THE PROJECT)			INCOME (THE MONEY YOU ARE GENERATING TO COVER THE TOTAL COST OF THE PROJECT. THIS INCLUDES IN-KIND CONTRIBUTION AND THE TOTAL RADF GRANT THAT YOU ARE SEEKING).	
A. Salaries, fees and allowances	Total What is the total cost of each item?	RADF How much RADF funding are you seeking to cover each item?	F. Earned Income e.g. Participant Fees	\$
SUBTOTAL A	\$	\$	SUBTOTAL F	\$
B. Production/program costs			G. Other Grant Income	

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SUBTOTAL B \$		SUBTOTAL G \$	
C. Promotion, documentation and marketing costs		H. Your own contribution	
SUBTOTAL C \$		SUBTOTAL H \$	
D. Total RADF grant requested \$		I. Sponsorships, fundraising and donations	
E. Administration costs			
SUBTOTAL E \$		SUBTOTAL I \$	
		J. RADF grant (Subtotal D) \$	
TOTAL EXPENDITURE (A+B+C+E) NOT D \$		Total Income (F+G+H+I+J) \$	

SECTION 4 – INFORMATION ABOUT THE APPLICANT

4.1 DO YOU IDENTIFY WITH ONE OR MORE OF THE FOLLOWING GROUPS?

**IF YOU ARE AN INDIVIDUAL APPLICANT, DO YOU, YOURSELF, IDENTIFY AS BELONGING TO ONE OR MORE OF THESE GROUPS?
IF YOU ARE AN ORGANISATION, DOES YOUR ORGANISATION EXIST PRIMARILY TO SERVICE ONE OR MORE OF THESE GROUPS? (TICK WHICH APPLIES)**

- Aboriginal and/or Torres Strait Islander
- Australian South Sea Islander
- From a culturally or linguistically diverse background
- Person with a disability
- Older person (55 years +)
- Young person (12 to 25 years)
- Not applicable

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4.2 IS YOUR ACTIVITY DIRECTLY AND SPECIFICALLY TARGETED AT ONE OR MORE OF THE FOLLOWING GROUPS?

Do not select a response if your activity is open to all members of the community but is not specifically targeted.

- | | |
|--|--|
| <input type="checkbox"/> Aboriginal and/or Torres Strait Islander people | <input type="checkbox"/> Older people (55 years +) |
| <input type="checkbox"/> Australian South Sea Islander people | <input type="checkbox"/> Young people (12 to 25 years) |
| <input type="checkbox"/> People from a culturally or linguistically diverse background | <input type="checkbox"/> Women |
| <input type="checkbox"/> People with a disability | <input type="checkbox"/> Men |

If your project does directly target one or more groups, describe how the group(s) will be targeted:

CERTIFICATION

5.1 ALL APPLICANTS

I, THE UNDERSIGNED CERTIFY THAT:

I have read and will abide by the Regional Arts Development Fund guidelines for Applicants together with any published revisions which are available at www.isaac.qld.gov.au/radf

The statements in this application are true and correct to the best of my knowledge, information and belief and the supporting material is my own work or the work of the artists named in this application.

I understand that the information provided in this application will be used by Council to process and assess my application and, if successful, to process, pay and administer the grant;

I give permission for Council to verify grants requested from other funding agencies in support of this project;

If this application is successful, I consent to Council disclosing the following information about the funded activity ("the information") to Arts Queensland:

- The information provided in this application;
- The amount of funding that I receive;
- The information that I provide in my project outcome report; and
- Text and images relating to the funded activity.

If this application is approved, I consent to Council and/or Arts Queensland giving the information to the media and/or Queensland government Members of Parliament and I understand that I may be contacted by them. I also consent to the Council and/or Arts Queensland publishing information about the funded activity in their annual reports or on their websites.

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I give permission for Council and Arts Queensland to use text and images of this funded activity to publicise RADF and to promote funding outcomes for arts and cultural development in Queensland.

I give permission for Council and Arts Queensland to use the information for reporting purposes, training, systems testing and process improvement. The information may be anonymised and used for statistical purposes.

SIGNATURE:

If you are under 18 years of age, your legal guardian must also sign this application.

Date:

PRINT NAME IN FULL

POSITION IN GROUP / ORGANISATION (IF RELEVANT)

5.2 CERTIFICATION BY AUSPICING ORGANISATION/INDIVIDUAL

Please note: both the applicant and the auspicing organisation/individual are considered responsible for ensuring the acquittal of grants and both could be deemed ineligible to place further applications to council and arts Queensland until all grants have been satisfactorily acquitted.

I/my organisation agree(s) to administer the grant that may be offered to the applicant on their behalf and that the information stated in section 1.8 of this application is true and correct.

SIGNATURE:

Date:

NAME OF AUSPICING BODY/INDIVIDUAL

CONTACT PERSON'S NAME IN FULL

POSITION IN GROUP OR ORGANISATION (IF RELEVANT)

APPENDIX SUPPORT MATERIAL

ELIGIBILITY CHECKLIST PROFESSIONAL/EMERGING PROFESSIONAL ARTISTS

A separate Eligibility Checklist must be completed by each artist who will be paid a salary, fee or allowance from the RADF grant. They must also supply their artistic resume or cv, a letter or confirmation of availability and a quotation of their fees.

Please make copies of this checklist as required or download a copy from the RADF page on the arts Queensland website www.arts.qld.gov.au

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The purpose of the RADF program is to support professional and emerging professional artists and arts workers (artists) to practice excellent art for and with communities for mutual development. This checklist has been developed to ensure that the status of artists as 'professional' and 'emerging professional' is clearly identified. Your responses to the questions below determine your status as an artist in regard to the RADF program.

You need to tick any three (3) or more of the artistic merits below to qualify as an artist with a professional or emerging professional status. If you cannot select a minimum of three (3) of the artistic merits, you do not meet the eligibility requirements as a professional or emerging artist who can be funded by the RADF program. In this case please contact your local RADF liaison officer to discuss alternative funding sources to support your arts activity/project.

ARTIST OR ARTS WORKER NAME

PLEASE TICK THE FOLLOWING ARTISTIC MERITS THAT APPLY TO YOU:

I have professional arts and/or cultural qualifications

I have an Australian Business Number

ABN:

I have devoted significant time to arts practice

I have been recognised as a professional by my peers

I have held public exhibitions or given public performances (not as part of a competition)

I have won important national and/or international prizes or awards

I have held public discussions and/or have had articles written about my work

I have been commissioned or employed on the basis of art skills and/or earning income from sales of artwork

I am a member of a professional association (or associations) as a professional artist. List the name(s) of the association(s)

I am an artist whose artistic or cultural knowledge has been recognised by my professional peers or the cultural community

I am an artist whose artistic or cultural knowledge has developed through oral traditions

Signature:

Date:

Print name:

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LAST CHECK BEFORE LODGING

PLEASE LABEL ALL SUPPORT MATERIAL WITH YOUR NAME AND ADDRESS AND TICK THE RELEVANT BOXES TO CONFIRM YOU HAVE PROVIDED ALL REQUISITE SUPPORT MATERIAL WITH YOUR APPLICATION

- Have you signed and dated your application?
-
- If your application is being auspiced, has the auspicating person/organisation signed and dated it?
-
- Have you attached up to three signed letters of support and confirmation from relevant communities and organisations that are partnering with you or participating in the activity?
-
- Have you attached an Eligibility Checklist for each professional or emerging professional artist and arts worker involved in your project/activity
-
- Have you attached a resume or cv, no longer than one a4 page per person, for each professional or emerging professional artist and arts worker involved in your project/activity?
-
- Have you attached written confirmation from the key artists, personnel and venue managers involved in the project (where appropriate), that they are available to do the activity on the proposed date(s)?
-
- Have you attached written quotations of the artist(s)' fees and materials for the activity?
-
- Have you attached letters of interest from: a publisher, an event organiser, a gallery, a performance venue, a music producer or any other presenting body to support applications for funding the creation of an arts or cultural product?
-
- Have you attached a copy of the certificate of currency for the public liability insurance that will cover your project?
-
- Have you attached up to three letters from professional artists and/or arts organisations in your area of practice that provide relevant comment in support of your application?
-

Once completed please send form and any attachment to:
records@isaac.qld.gov.au or Isaac Regional Council, PO Box 97, Moranbah QLD 4744
or deliver in person to your local Isaac Regional Council office

DEPARTMENT USE ONLY

PROCESSED BY	Signature	Date
	Print Name	