Flinders Shire Council - RADF Quick Response

Applicant Details

- Quick Response applications can be submitted at any time while RADF grant funds are still available.
- The maximum amount of funding available through Quick Response is \$1,500.
- Quick Response applications are primarily intended for individual skills development; however, applications in other categories will be considered.
- Co-contribution requirements apply as previously stated, and the applicant must demonstrate a genuine need for the application to be considered out of the normal timeframes for assessment (such as an unexpected opportunity that would be lost if not responded to within a short timeframe).
- Before beginning your application, you will need to read the Flinders Shire Council Regional Arts Development Fund Guidelines (available HERE).
- All applicants are encouraged to meet with the Arts & Culture Community Development Officer to discuss their application before applying.
- For assistance or to arrange an appointment, please contact email: mele@flinders.qld.gov.au or p. 4741 2900.

| I have read and understand the Regional Arts Development Fund guidelines O Yes No | | | | | | | | |
|--|------------|--------------------------------|---|--|--|--|--|--|
| Applican O Individ | | Organisation | n | Auspiced Application | | | | |
| Please note that individuals or organisations who do not have an ABN, will require an individual or organisation who hold an ABN to auspice their project. Learn more about auspicing here. The individual / organisation will be responsible for administering the gran In the support material section of this application, applicants will need to upload a copy of letter from the individual / organisation consenting to this agreement. | | | | | | | | |
| Do you, or your group/organisation, predominantly identify with any of the community groups below? Aboriginal people Torres Strait Islanders Australian South Sea Islanders Older people (over 55 years of age) People with a disability Women Children and young people (30 years and under) Please note, this question is only for statistical data and is not used in relation to the approval of your application. | | | | | | | | |
| Individual | | | | | | | | |
| Name Title | First Name | Last Name | | | | | | |
| | | | | | | | | |

| Address | | |
|---------------------------------------|----------------------------------|-----------------------|
| Address | | |
| | | |
| | | |
| Email | | |
| | | |
| Must be an email address. | | |
| Phone Number | | |
| | | |
| Must be an Australian phone number. | | |
| Do you have Australian citizen | ship or normanout residency | status? |
| Yes | No | statusf |
| | | |
| ABN | | |
| The ABN provided will be used to | ook up the following information | Click Lookup above to |
| check that you have entered the A | | Click Lookup above to |
| Information from the Australian Busin | ness Register | |
| ABN | | |
| Entity name | | |
| ABN status | | |
| Entity type | | |
| Goods & Services Tax (GST) | | |
| DGR Endorsed | | |
| | More information | |
| ACNC Registration | | |
| Tax Concessions | | |
| Main business location | | |
| Must be an ABN. | | |
| Organisation | | |
| Organisation Name | | |
| Organisation Name | | |
| | | |
| | | |
| Contact Person and Position | | |
| | | |

Address

| Address |
|--|
| Address |
| |
| |
| Email |
| Email |
| Must be an email address. |
| |
| Phone Number |
| |
| Must be an Australian phone number. |
| ABN |
| |
| The ABN provided will be used to look up the following information. Click Lookup above |
| 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 <u>More information</u> |
| ACNC Registration |
| Tax Concessions |
| Main business location |
| Must be an ABN. |
| Ausniced Applications |
| Auspiced Applications |
| Who is your auspicing arrangement with? |
| An incorporated organisation |
| An individual with an ABN |
| Name |
| ○ Individual ○ Organisation |
| Organisation Name |
| Title First Name Last Name |
| Title First Name Last Name |

ABN

| | d to look up the following information. Click Lookup above to |
|--|---|
| check that you have entered Information from the Australian | |
| ABN | Submices Register |
| Entity name | |
| ABN status | |
| Entity type | |
| Goods & Services Tax (GST) | |
| DGR Endorsed | |
| ATO Charity Type | More information |
| ACNC Registration | |
| Tax Concessions | |
| Main business location | |
| Address Address | |
| | |
| Email | |
| | |
| Must be an email address. | |
| Auspicing | |
| If your project is being auspic organisation consenting to th | ed, please include a letter confirming this from the individual / is agreement. |
| Attach a file: | |
| | |
| | |
| About the Project | |
| | |

About the Project

* indicates a required field

| Project Title * | Project Title * | | | | | | | |
|--|--|-----------------------|---------------------------|------------------------------|----------------|--|--|--|
| | | | | | | | | |
| Start Date * | | | | | | | | |
| Start Date * | | | | | | | | |
| Must be a date. | | | | | | | | |
| NOTE: Your application w | ill not be eligible if y | our proje | ect begins befo | ore funding is appro | ved. | | | |
| End Date | | | | | | | | |
| | | | | | | | | |
| Must be a date. | | | | | | | | |
| Describe your projec | ct or activity | | | | | | | |
| Provide a clear descrip words) | tion of the rationa | le and c | bjectives of | your program/pro | ject. (Max 300 | | | |
| Consider: | | | | | | | | |
| What are the mairWhat are the mairHow does your proProvide any sketch | n aims/objectives o pject relate to Flind | of this p ders Shi | roject? re locally det | ermined priorities | 5? | | | |
| * | | | | | | | | |
| | | | | | | | | |
| Word count: Must be between 50 and Consider: What are the m this project? How does yo sketches or visual aids w | nain activities involve our project relate to | Flinders | Shire locally de | etermined priorities | | | | |
| Sketches or visual a Attach a file: | ids which may a | ssist | | | | | | |
| | | | | | | | | |
| What is the main art O Visual arts, craft and design | t form category of Community Arts and Cultural Development | | project? * Dance | ○ Music | | | | |
| ○ Theatre | Museums /Collections / Herit | | Writing | ○ Film / | Multimedia | | | |
| Select the type of a | ctivities particip | ated in | as a part of | f the funded act | tivitv: * | | | |
| ☐ Community consult☐ Creative developme☐ Cultural tourism☐ Events and festivals | ation, arts researcent of new work | | Performanc Placemakin | es g I career developm | - | | | |

| ☐ Exhibitions and coll | ections | □ Other: | | | | | |
|--|--|---|--|--|--|--|--|
| ☐ Heritage protection | and promotion | | | | | | |
| \$ Must be a dollar amount. | ding are you seeking . program covers only 65% | | | | | | |
| What is the total nu | mber of volunteers e | expected? * | | | | | |
| Those donating their tim | e: artists, professionals, co | ommunity members, elde | rs etc. | | | | |
| What is the total pa | rticipant numbers ex | pected? * | | | | | |
| Participants are those th | at actively engage in arts | activities eg. workshop pa | articipants | | | | |
| What is the total au | dience numbers expe | ected? * | | | | | |
| Audience members have event | dience members have a passive engagement eg: audiences at an art exhibition, performance, ent | | | | | | |
| ☐ Aboriginal People☐ Torres Strait Island☐ Australian South S | ea Islanders g people (30 years and 55 years of age) | | oject (if applicable) | | | | |
| Only complete this | ed at specific commun section if your project f these groups, not if | t specially and direc | tly targets people | | | | |
| ○ Women | Aboriginal peoples | culturally and linguistically diverse | Seniors (55 years or older) | | | | |
| Men Emerging Artists / Cultural Workers Established Artists Cultural Works | Torres StraitIslander peoplesAustralian SouthSea Islander peoples | backgrounds O Young people (12-21 years of age) O Children (0-11) | People with a disabilityRegional Queenslander | | | | |
| If your project is sp | ecifically targeting a | group / community / | audience | | | | |
| (i.e. Indigenous people). | describe your process for | this engagement. | | | | | |

Locally Determined Priorities and Focus Areas

Does your project align with any of the local arts and culture priorities or focus areas? Please select those relevant to your project.

Word count:

Must be no more than 100 words.

Examples include: follow up on previous activities, surveys, verbal discussions.

| ı | m | p | a | C | t |
|---|---|---|---|---|---|
| - | | _ | • | _ | _ |

- What are the returns on this investment?
- This can be cultural, artistic, social or economic.

| * | | |
|-------------|--|--|
| | | |
| | | |
| | | |
| Word count: | | |

Must be no more than 100 words.

Examples include: More communities members having specific skills, increase of tourism, increase of social activities.

Viability

- Is there good planning behind this application?
- Are there possibilities to expand this activity further?
- Have there been partnerships developed?

| * | | | |
|---|--|--|--|
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Word count:

Must be no more than 100 words.

How will this project benefit you, your community or artists/cultural workers?

Give a brief description about the results you expect from the project. Examples could be: skill development, community access, media coverage for your art form, professional development, innovation, new work, quality of life for the community.

How will you capture audience / participant / partner feedback for your project?

Please note this is necessary part of your project delivery and outcome report - resources are available on the Arts Queensland website or RADF Liaison Officer.

Project Plan

Your project plan should be as comprehensive as possible, outlining the various stages of your project (e.g. meetings with partners, booking facilities, advertising etc.).

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

All applicants must complete this section

| Project Stage | Expected Completion Date | Please outline the steps you have taken to address the issues of workplace health and safety, public liability insurance, copyright and relevant licenses. | | | |
|---|--|--|--|--|--|
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| | 1 | | | | |
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| | <u> </u> | | | | |
| | | | | | |
| | Must be a date and no earlier than 28/2/2022. | | | | |
| Artist Information | | | | | |
| recommended rate of pay bectheir time as an in-kind contributen note any in-kind contributextra page if necessary). Please each artist or arts worker recees • A resume or CV from to Eligibility Checklist for • A separate Eligibili paid salaries, fees of | cultural workers involved in the project. If you are paying only a portion of the ded rate of pay because the professionals involved in the project are contributing as an in-kind contribution, please list the total rate of pay in the table below and any in-kind contribution on the income section of the budget (please attach an if necessary). Please remember to attach the following four documents from or arts worker receiving RADF funding: Sume or CV from the artist ility Checklist for each Professional and Emerging Professional Artist A separate Eligibility Checklist must be completed by each artist who will be paid salaries, fees or allowances from the RADF grant. Please follow the link below to access the form and upload it below. | | | | |
| Letter of confirmation | | | | | |
| • Written confirmatio | on from the artists of their supp | ort for the project. | | | |
| Schedule of fees | | | | | |
| Artist Information Upload Attach a file: | | | | | |
| | | | | | |
| A minimum of 1 file and a maximum | um of 10 files may be attached. | | | | |
| How many people total will | l be employed (paid) throug | h the project? | | | |
| | | | | | |
| How many volunteers (unp | aid workers) will be involve | d with the project? | | | |

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Project Support

Project support can include

- Letters of support from relevant community groups, organisations and businesses.
- Sketches of project plans and outcomes
- Examples and outcomes of previous works / events
- Confirmations of significant partnerships

| Attach a fi | le: | | | | | | |
|-------------|--------|-----------|-----------|-------|---------|--------|----------|
| | | | | | | | |
| A minimum | of 1 f | ile and a | a maximum | of 10 | files r | nav be | attached |

Budget

Budget

Income Examples

- Earned Income
- Contribution from Artists and Others (Please note if this is in-kind)
- Sponsorship, fundraising and donations (Please note where this is in-kind)
- RADF Grant
- Other Grants
 - Examples: Australia Council / Education Queensland / Local Government / Gambling Community Benefit Fund / Federal Government

Expenditure Examples

- Salaries, Fees and Allowances
- Production/ Program Costs
- Promotion, Documentation and Marketing
- Administration

| Income | \$ Expenditure | \$ | | |
|--------|-------------------|-----------|--|--|
| | \$ | \$ | | |
| | \$ | \$ | | |
| | \$ | \$ | | |
| | \$ | \$ | | |
| | \$ | \$ | | |
| | \$ | \$ | | |
| | \$ | \$ | | |
| | \$ | \$ | | |

Budget Totals

| Total Income Amount | Total Expenditure Amount | Income - Expenditure | | |
|-----------------------|--------------------------|-----------------------|--|--|
| \$ | \$ | \$ | | |
| This number/amount is | This number/amount is | This number/amount is | | |
| calculated. | calculated. | calculated. | | |

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Budget Information

| Please provide | e quotes and | l estimates for | all budget | items you | are requesting | g RADF t | o fund. |
|-----------------|---------------|-----------------|--------------|--------------|----------------|----------|---------|
| This includes a | artists fees, | accommodatio | n, travel, m | naterials, v | enue hire etc. | | |

| Attach a file: | |
|--|---------------|
| | |
| A minimum of 1 file and a maximum of 10 files ma | v he attached |

Certification

* indicates a required field

All Applicants I, the undersigned, certify that: • I have read and will abide by the Flinders Shire Council Regional Arts Development Fund Guidelines. • 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 have read and understood the Information and Privacy and Right to Information Statement below and agree to the use and disclosure of information as outlined in the Statement.

Information Privacy and Right to Information The information you provide in your grant application will be used by the Council to process and assess your application and, if successful, to process, pay and administer your grant. The Council may contact other funding agencies to verify grants requested from other funding agencies in support of your project. If your application is successful, the Council may disclose the following Information to Arts Queensland: the information you provide in your grant application the amount of funding you receive the information you provide in your outcome report and text and images relating to your funded activity.

The Information may be used by the Council or Arts Queensland for reporting purposes, training, systems testing and process improvement. The Information may be anonymised and used for statistical purposes. The Information may be used by the Council or Arts Queensland for the promotion of RADF or the promotion of funding outcomes for arts and cultural development in Queensland. For this purpose, the Information and your contact details may be provided to Queensland Government Members of Parliament, the media and other agencies who may contact you directly. The Council and Arts Queensland may also publish the Information in their Annual Reports or on their websites.

| Name * Title | First Name | Last Name |
|-----------------|------------|-----------|
| | | |
| Organis | ation | |
| | | |
| Position | | |
| | | |
| Date * | | |

| Must be a | date. | | |
|-----------|-------|--|--|