Application Summary

* indicates a required field

Activity title *

Completing Your Application

Please allow plenty of time to complete your application. It is important that you prepare adequately and set aside enough time to write your application.

Before you start your application:

- Read the guidelines and VicScreen's Terms of Trade.
- Review this online application form.
- Read VicScreen's <u>Gender & Diversity Statement</u>. VicScreen is committed to promoting and supporting gender equality, diversity and inclusiveness in the Victorian screen industry and requires applicants to demonstrate diversity and inclusion in their applications.

If you have any questions, please contact the relevant <u>Grants Officer</u> during business hours (9am to 5pm, Monday to Friday).

| Eligibility |
|--|
| Please confirm that the applicant is eligible to apply to this program and VicScreen: |
| □ The applicant is incorporated in Australia, or constituted as a legal entity □ The applicant has the right to carry out the project or proposal that is the subject of this application (including relevant copyright and appropriate clearances from all significant participants) |
| \Box The applicant is not a broadcaster, subsidiary of or jointly owned by a broadcaster or its subsidiary or related to any broadcasting entity |
| ☐ The company is not an online content provider (VOD, SVOD) subsidiary of, or jointly owned by an online content provider or its subsidiary, or related to any online content providing entity |
| ☐ The applicant is not an employee of a broadcaster, or commissioning platform, or any related entities |
| ☐ The applicant is not a Federal or State Government department or entity ☐ The applicant is an Australian screen industry guild, association or organisation with specialist screen industry experience At least 7 choices must be selected. You must meet all conditions in order to be eligible |
| ğ . |

Applicant summary

Applicant (must be a screen industry guild, association or organisation) *

| Organisation Name | | |
|--|------------------------------|--------------------------|
| | | |
| ABN * | | |
| | | |
| The ABN provided will be used to check that you have entered the | | n. Click Lookup above to |
| Information from the Australian Bus | iness 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 | | |
| Applicant contact details Company principal place of be Address | usiness (must not be PO Box) |) * |
| | | |
| | | |
| Must be an Australian post code | | |
| Company postal address (if d Address | ifferent to the above) | |
| | | |
| Must be an Australian post code | | |
| Company Mobile Phone * | | |
| | | |
| Must be an Australian phone number | • | |
| Email * | | |
| Must be an email address. | | |
| | | |

| Accounts Email * |
|--|
| |
| Must be an email address. All financial documents will be forwarded to this address |
| |
| Company Website |
| Must be a URL |
| Is this a sale director company? * |
| Is this a sole director company? * ○ Yes ○ No |
| Contact for this application |
| Contact Person's Name * |
| Title First Name Last Name |
| |
| Position within applicant company * |
| |
| Mobile Phone of Contact * |
| Must be an Australian phone number |
| Contact email address * |
| Contact email address ** |
| Must be an email address. |
| Authorised signatory |
| If you are successful in securing funding, VicScreen will require an authorised officer to sign the funding agreement. |
| Please provide the following details for the authorised officer: |
| Name * |
| Title First Name Last Name |
| |
| Position of Signatory * |
| |
| Authorized simustom, small * |
| Authorised signatory email * |
| Must be an email address |

Company Signatories

For companies with multiple directors, if you are successful in securing funding, VicScreen will require two signatories on the funding agreement.

Please provide the following details for two company directors, or authorised signatories for the company:

| Company Signatory 1 * Title First Name | Last Name | |
|--|------------------|--|
| THE THE NAME | Last Haine | |
| Company Signatory 1 Position * | | |
| company dignatory 2 re | , Sicion | |
| Company Signatory 1 Pr | imary Email * | |
| , , , , | , | |
| Must be an email address. | | |
| Company Signatory 2 * Title First Name | Last Name | |
| | | |
| Company Signatory 2 Position * | | |
| | | |
| Company Signatory 2 Pr | imary Email * | |
| Company Signatory 2 Fi | illiai y Liliaii | |
| Must be an email address. | | |
| | | |
| Activity details | | |
| * indicates a required field | | |
| Activity Eligibility | | |

Please confirm that the activity: *

□ Will take place in Victoria within nine months of the approval date
 □ Promotes and supports gender equality, diversity and accessibility
 □ Has not received funding from VicScreen's Audience Engagement Program for the same activity in the same financial year
 □ Has diverse early career practitioners as their target participants
 □ Is not limited to: general masterclasses, 'In Conversations', networking or social activities for industry-based groups or guild members / award ceremonies / distribution activities, development or production of screen content / development or enhancement of websites / publications (online/podcast/print).

| Seminar or lecture |
|-----------------------------------|
| |
| |
| |
| ns |
| |
| t audiences your activity/ies are |
| Mid-Career - Games Practitioners |
| Experienced - Games Practitioners |
| Other: |
| |
| te Activity End Date |
| Must be a date. |
| • |

Word count:

Must be no more than 100 words.

Please insert the relevant KPIs below.

For items not relevant to your program please put 0.

Please note that we will be expecting data on participant satisfaction and demographic data at the acquittal stage. Participant surveys may need to be undertaken during your activity in order to capture this information in your acquittal documents. Please contact the Program Manager to discuss further if required.

| Estimated total number of participants * | |
|---|-------------------------------|
| or participants | Must be a number. |
| Estimated number of screen practitioner participants * | Must be a number. |
| Estimated number of First People participants * | Must be a number. |
| Estimated number of participants from regional Victoria * | Must be a number. |
| Estimated number of interstate participants * | Must be a number. |
| Estimated number of international participants * | Must be a number. |
| Participant satisfaction (insert a percentage out of 100) * | Must be a number. |
| Have you already sent a pro | posal to the Program Manager? |

Proposal for the Activity/ies

Yes

Upload a detailed Proposal for the activity(ies), the proposal should include:

- Details of the Activity/ies
- Venue (all venues must be accessible to people of all abilities)
- Key personnel involved in the activity and their expertise in delivering similar activity (including any speakers, mentors, etc.)

 \bigcirc No

• Market differentiation

| • Past outcomes of the activity (if it has | been delivered before) |
|---|--|
| Attach a file: | |
| | |
| Please upload file name as: 'Applicant Name – D | ocument Title' |
| Total request from VicScreen for all ac | tivities * |
| \$ | |
| Must be a whole dollar amount (no cents). Note the maximum total VicScreen will contribu | te is \$50,000 per applicant, per financial year |
| Total budget for your activity/ies * | |
| Must be a whole dollar amount (no cents). | |
| Have you already sent a budget for the Manager? * | e proposed activity/ies to the Program |
| ○ Yes | ○ No |
| sought for multiple Activities). The bue expenses, including (and differentiating | pports each activity (if funding is being dget/s will include details of revenue and g between all proposed and confirmed arges and fees to participants. If you have per activity * |
| | |
| Additional Documents | |
| If you have any additional documents application, please upload them here. Attach a file: | you would like to provide in support of your |
| | |
| COVID-19 | |
| Victorian Government COVID Safety Re ○ The Activity will comply with applicable requirements | |
| Consideration of Diversity | |

VicScreen is committed to promoting and supporting gender equality, diversity and inclusiveness in the Victorian screen industry and requires applicants to demonstrate diversity and inclusion in their applications. Applicants should read VicScreen's <u>Gender Diversity Statement</u> prior to applying.

We will only provide support for activities that commit to promoting gender equality, diversity, and accessibility.

Applications are assessed based on how robustly your activity advances diversity and inclusion across one or more core areas, including:

- Meaningful representation of diversity in themes and narratives of screened content and/or panel topics/members by people with lived experience
- Industry access and opportunities for training/career progression/mentoring.
- Audience development
- Accessibility of the activity

| In the text box below please indicate ho inclusion across one or more of the core | | |
|---|----------------------------|--------------------------|
| | | |
| | | |
| Must be no more than 500 words. | | |
| Are there people involved in delivering to as well as guest presenters and panellis equality, diversity and inclusion? * O Yes Please note: we do not require you to identify the | ts) who have a lived No | experience of gende |
| Are all components of the activities acce | essible, including ve | nues and screenings? |
| ○ Yes | ○ No | |
| Briefly state what measures are in place | to be inclusive and | accessible: * |
| | | |
| Word count: Must be no more than 250 words. | | |
| Optional upload, if preferred Attach a file: | | |
| | | |
| Please adhere to the following naming convention | s: [ACTIVITY NAME] - Acco | essibility Document. The |

Privacy statement and Applicant declaration

* indicates a required field

Privacy statement

VicScreen Website

How did you hear about this program? *

All personal information submitted to VicScreen will be dealt with in accordance with our Privacy statement.

| 0 | VicScreen eNewsletter | | | |
|--------------------------------|------------------------------|--|--|--|
| 0 | VicScreen Social Media | | | |
| 0 | Through another organisation | | | |
| 0 | At a screen industry event | | | |
| Ō | From someone I know | | | |
| $\tilde{\bigcirc}$ | Other | | | |
| Ple | ease specify: * | | | |
| Additional Comments (Optional) | | | | |
| | | | | |

Bring the action to your inbox! Join VicScreen's mailing list here.

Applicant declaration

- The applicant declares that they have read and understood VicScreen's current program guidelines and terms of trade. The applicant agrees and acknowledges that VicScreen reserves the right to vary its guidelines and terms of trade without notice to the applicant from time to time.
- The applicant agrees and understands that funding decisions (including the amount of funding) are discretionary and the decision to approve or reject any funding application rests with VicScreen and/or the relevant Minister.
- The applicant warrants and represents that the information provided and all attachments are, to the best of the applicant's knowledge and belief, true and correct and that it has not omitted any material information which would be required by VicScreen in relation to determining whether to approve funding of a project.
- The applicant undertakes to advise VicScreen in the event of any significant or material change to the proposed project or any supporting materials submitted regarding the project.
- The applicant warrants and represents that it owns or holds all relevant rights necessary to proceed with the proposed project outlined in this application and all materials supplied to VicScreen as part of this application will not infringe any third party's rights. The applicant agrees to indemnify and hold harmless VicScreen for and against any cost, loss, damage or expense suffered or incurred by VicScreen as a result of or arising from the use of the application and material.

- The applicant acknowledges and agrees that VicScreen may copy, store, adapt, change, edit and use, communicate and transmit any material supplied by applicants as part of this application in any media worldwide and may provide such material to nominated third party consultants and advisors for advice, review and evaluation purposes. We may also discuss your application with listed project investors/personnel for our business purposes
- You acknowledge and agree that you are submitting your personal information and VicScreen will collect this in accordance with its Privacy Policy at https://vicscreen.vic.gov.au/legal/privacy

Disclosure of project information

- You acknowledge and agree that if your application is successful, VicScreen may publish information about your project in Victorian Government media releases, on VicScreen's website, social media platforms, third party media channels (such as Youtube and Vimeo) or in VicScreen's e-newsletter for its promotional and publicity purposes only. This information may include your project's title, genre and synopsis, names and past credits of individuals comprising the key creative team and the amount of VicScreen's investment in the project.
- You acknowledge and agree that typing your name in this application form and submitting the form electronically will constitute signature by electronic communication under the *Electronic Transactions (Victoria) Act 2000* and related Acts.
- If the applicant is an individual, the individual must type their name on the form. If the applicant is a company, the authorised company officer must type their name on the form. By doing so, the authorised company officer warrants that he/she is authorised to sign this application form for and on behalf of the company.

| Name of a | authorised signat | ory * | |
|--------------|-------------------|-----------|--|
| Title | First Name | Last Name | |
| | | | |
| | | | |
| | | | |
| Date * | | | |
| | | | |
| | | | |
| Must be a di | ato | | |

Industry Development - Programs

Industry Development - Programs