





2024 APPLICATION FORM NEW ENGLAND YOUNG ARTS GRANTS

Closing Date: Friday, 10 May 2024

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Overview of Project

Project Title And brief description		
Applicant (individual or not-for-profit name):		
Funding Sought:	Grant Application Amount Breakdown of amount (if applicable): • \$ – Purpose • \$ – Purpose	\$
	Total Cost of Project	\$
	Total Funds already sourced Details of those funds: • \$ – Source • \$ – Source	\$
Completion Date: Must be before 31 March 2025		







Contact details for Applicant

Coi	ntact Name:		
	sition / Relationship Applicant:		
Tel	ephone:		
Em	ail:		
Pos	stal Address:		
Apı	olication for Grant add	ressing criteria	
#	Criterion	Applicant to complete as to each criterion:	how the project meets
Α	QUALIFYING CRITERIA		
1	Project is in an area of artistic endeavour	Visual Arts or Fine Arts Music Dramatic Arts and Performa Design Other	
2	Applicant or beneficiaries are 25 years or under	Applicant is 25 or under and Primary beneficiaries of Proj	
3	Applicant or beneficiaries reside in the New England (NE) or North West of NSW (NW)	Applicant is a resident of the Primary beneficiaries of Proj	
В	Value criteria (Community)		
4	Benefit to the artistic community How will the project benefit one or more of the artistic stakeholders of the region (e.g. artists / performers / audiences)?		
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5	Sustained benefit to the applicant and/or the arts in the area Does any benefit derived have the potential to be an enduring benefit for the applicant and/or the region?	
С	VALUE CRITERIA (SPONSORS)	
6	Report N.B. Reporting Requirement under 'Declaration' below. Indicate how you or your organisation will measure the outcomes from your project in terms of the guidelines.	
D	TRACK RECORD OR REFERENCES	
7	Supporting Evidence Include, if relevant, any evidence of achievements so far. If any attachments, note what they are in this section.	
Ε	HARDSHIP CONSIDERATION (IF A	PPLICABLE)
8	Socio-economic or geographical hardship	Remote living / working Person with a disability Culturally and linguistically diverse Aboriginal or Torres Strait Islander Other

Declaration

To be completed by a parent or guardian if the Applicant is a child under the age of 18 years.

Consents

- The Applicant consents to disclosure of the details of this application for the purposes of assessing the application or reporting on the grant program
- The Applicant consents to publicity of the details of the project and the Applicant regarding any grant awarded
- The Applicant consents to the use of images provided in such publications <u>Acknowledgement</u>
- The Applicant acknowledges that any grant awarded may be for an amount less than that applied for and that grants may or may not be funded at the absolute discretion







of ArtsNational Armidale/Rotary Club of Armidale Central, usually in the range of \$300 - \$3,000.

Undertakings

- Reporting Requirement The Applicant shall provide a written/electronic report on the project's outcomes to ArtsNational Armidale on completion of the project (or by 31st March 2025 at the latest).
- Applicant acknowledgement of grant The Applicant shall acknowledge the grant and grant bodies at all available opportunities in relation to the project and project outcomes.
- Assistance for consent to use images The Applicant shall assist in seeking parental/guardian consent required for our use of any publicity photos of the project.

In signing below, I declare that the Applicant consents, acknowledges and undertakes to the above and further declare that I am authorised to sign on behalf of the Applicant:

Signature:	Date: 20)24
Name of Authorised Signatory:		••
Relationship to		
Applicant/Position:		••

Completed applications to be sent for receipt by 10 May 2024 to:

By email artsnationalarmidale@gmail.com
(preferred)

By post ArtsNational Armidale
P.O. Box 1029
ARMIDALE NSW 2350

Committee Use

Date Application Received	
Score	
Overall Rank	
Grant Approval	Yes / No
Amount (if approved)	\$