

# First Nations Arts Business Fund Application

## Form Preview

### Privacy and Eligibility

\* indicates a required field

#### Privacy statement

By completing this application you understand and agree to the way in which Arts Queensland and its third party service providers collect and manage your personal information. For further Arts Queensland privacy information go to <https://artsqueensland.smartygrants.com.au/>. For information about [OurCommunity's privacy policy and terms of use](#).

#### Eligibility check

**Please select the options that best describe you as the applicant: \***

- I am applying as an artist or arts worker that is a sole trader
- I am applying as the owner of my own arts business
- I am applying on behalf of an arts business or organisation

**I confirm that I am of Aboriginal or Torres Strait Islander descent and identify as an Aboriginal person or Torres Strait Islander, and am accepted as such by the community in which I live, or formerly lived. \***

Yes

No

**I am applying on behalf of a First Nations organisation or business \***

Yes

No

For the purposes of The Fund, a First Nations organisation is one that is at least 50% owned and led by Aboriginal and/or Torres Strait Islander peoples, who have formal authority to make decisions in operations and governance of the organisation.

**You are not eligible to apply to this fund. Please refer to the fund guidelines.**

### Applicant details

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\* indicates a required field

**Applicant name \***

Individual       Organisation  
Organisation Name

Title      First Name      Last Name

<input type="text"/>	<input type="text"/>	<input type="text"/>
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**Street address \***

Address

  

If your address is not found, click on - Can't find my address - and fill out the address in the space provided.

**Postal address \***

Address

  

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

If your address is not found, click on - Can't find my address - and fill out the address in the space provided.

**Daytime contact number \***

Please enter area code

**Mobile phone number**

Must be an Australian phone number.

**Applicant website**

Must be a URL

**Primary contact email \***

Must be an email address.

## State Electorate and Local Government Area (LGA)

Use the [Electoral Commission Queensland website](#) to find your State Electorate and LGA.

Please enter your Street address provided above in the search field.

Use the Drop-down below to enter your State Electorate and LGA. To scroll quickly you can start typing the name.

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**Select your State Electorate \***

Search your address on the [Electoral Commission Queensland website](#) to find your electorate.

**Select your Local Government Area (LGA) \***

Search your location using the [Queensland place names search website](#) to find your Local Government Area (LGA).

### Australian Business Number (ABN) details

**ABN must be registered in the same name as the applicant name - funding cannot be provided through auspicing arrangements.**

**Applicant 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	<a href="#">More information</a>
ACNC Registration	
Tax Concessions	
Main business location	

Must be an ABN.

**GST Registered \***

Yes

No

**Operating entity \***

For profit

Not for profit

**Trading name or professional name (if different)?**

**Your application is not saved until you click on the Save Button. Please ensure that you regularly save your application.**

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### Business details

\* indicates a required field

#### Artists and artsworkers

**Briefly describe yourself as an artist or arts worker:**

**I would like to supply this information through**  
\*

- a written response (up to 250 words)
- uploading a 2-3 minute video

**Provide your written response here**

Word count:

Must be no more than 250 words.

**Please upload your video or audio recording**

Attach a file:

#### Arts Businesses

**Briefly describe your arts and cultural business capability including:**

- what your business does/produces and track record of delivery
- your business structure and staffing
- your partners
- annual turnover

**I would like to supply this information through: \***

- a written response (up to 250 words)
- uploading my business capability statement
- uploading a 2-3 minute video or audio recording

**Provide your written response here**

Word count:

Must be no more than 250 words.

**Upload your video or audio recording, or your business capability statement here**

Attach a file:

**What are you hoping the results will be for your business by accessing this funding?**

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### I would like to supply this information through

- a written response (up to 250 words)
- uploading a 2-3 minute video or audio recording

### Provide your written response here

Word count:

Must be no more than 250 words.

### Please upload your video or audio recording

Attach a file:

## Activity details and Expenditure

\* indicates a required field

### Select the business support area(s) that best matches the activity you are seeking funding for, as demonstrated by your quote(s) (select all that apply): \*

- Category 1 - Business planning
- Category 1 - Governance planning (including cultural governance)
- Category 2 - HR management and resource planning (including recruitment and selection processes)
- Category 2 - Financial management and processes (budgeting and financial processes)
- Category 2 - Business related training and coaching (must build skills that contribute to growing business capacity)

Tick all that apply

If you are applying for business services from Category 2 then you must attach your existing business plan, governance plan, strategic plan or equivalent document in the supporting material section.

## Business need

### Why does your business need this? \*

### What are you hoping the results will be for your business by accessing this funding? \*

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### Activity Dates

**Activity start date \***

**Activity end date \***

### Details of services required (include detail from quote)

Please include any quotes you are seeking support for, but note that the maximum funding you can receive is \$10,000 (excl GST).

Description	Supplier	Amount \$ (excluding GST)	Amount \$ (including GST)
		\$	\$
		\$	\$
		\$	\$

Amount \$ (excluding GST)

\$

This number/amount is calculated.

Amount \$ (including GST)

\$

This number/amount is calculated.

You have indicated you **are GST registered**. Your funding request is based on the amounts excluding GST and you can receive up to \$10,000 excl GST. AQ will add GST to your approved funding.

You have indicated you **are not registered for GST**. Your funding request is based on the amounts including GST and you can receive up to \$11,000 incl GST.

### Mandatory Support material

\* indicates a required field

Upload quote or quotes

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Supplier quote or quotes must:

- include supplier details – Name, ABN, contact details and website URL; and
- give details of the activity, a description of service and proposed delivery date; and
- be issued on the supplier's business letterhead: or
- is a print-out of an online shopping cart (showing the supplier's name) for online purchases

**IF YOU ARE UPLOADING MULTIPLE FILES IT IS RECOMMENDED THAT YOU SAVE YOUR PROGRESS AFTER ATTACHING 3 FILES.**

### **File upload \***

Attach a file:

### Category 2 services upload

**Please attach your existing business plan, governance plan, strategic plan or equivalent document \***

Attach a file:

## Reporting Requirements

\* indicates a required field

**if your application is successful, you will be required to complete a report with the following information once you have completed the funded activity (within 12 months of receiving your grant).**

### **Contact information**

- Applicant name
- Phone number
- Contact name
- Contact email address

### **Evidence of Expenditure**

Upload evidence that funding has been spent on the approved services as per quote attached to the application. Evidence includes receipts or copies of payment transactions to confirm expenditure.

### **Outcome Survey**

- What has this funding helped you achieve for your business?
- What are your next steps to grow your business capacity?
- If there were future rounds of this fund, what services would you like to see included?
- How satisfied are you that the objectives of the fund were achieved?

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- *strengthen cultural governance, business and strategic planning*  
(Very satisfied mildly dissatisfied very dissatisfied)
- *increase corporate and commercial capacity to grow new revenue and market opportunities*  
(Very satisfied mildly dissatisfied very dissatisfied)
- *enable professional upskilling and development for board and/or staff*  
(Very satisfied mildly dissatisfied very dissatisfied)
- If mildly dissatisfied or very dissatisfied, what are the reasons or what improvements could be made to fund?

### Confirmation of Reporting Requirements \*

- I understand the reporting requirements of this grant

## Certification

\* indicates a required field

### All applicants

#### I, the undersigned, certify that:

- I have read and I/my organisation will abide by the First Nations Arts Business Funding Program guidelines.
  - I have read, and I/my organisation is able to comply with, all of the requirements of the application and any schedule or attachments.
  - I acknowledge that if this application is successful, I/my organisation will be required to enter into a funding agreement with Arts Queensland.
  - The statements in this application are true and correct to the best of my knowledge, information and belief.
  - I acknowledge that, if I am/ my organisation is successful, and I/my organisation will be held accountable to deliverables outlined in this application, and information provided in this application will form part of the funding agreement with Arts Queensland, along with;
- a) The [Guidelines](#) pertaining to the grant fund as specified in the application.
- b) The application, Letter of Offer/Funding Agreement and any schedules or attachment.
- I/my organisation will keep and maintain, for a period of 5 years, the necessary records to substantiate the application outlined in this form and any progress and outcome reporting
  - I/my organisation consent that information provided in this application may be used for training, systems testing or process improvement purposes by Arts Queensland staff.
  - I/my organisation give permission for Arts Queensland to forward my information to the most appropriate industry experts or Government representative.
  - If this application is approved, I/my organisation consent to the media and Queensland's State MPs being given information about the funded project and I understand I may be contacted directly by them.
  - I/my organisation consent to information about the funded project and the amount of funding received being published on Arts Queensland's website and/or the Queensland Government Open Data Portal.

I agree to the above \*

Yes

No



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**Name \***

Title

First Name

Last Name

**Position**

**Date \***

Must be a date

Contact Us

**[Arts Queensland](#)**

[www.arts.qld.gov.au](http://www.arts.qld.gov.au)

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**Telephone:** +61 7 3034 4016 **Toll-free Telephone:** 1800 175 531 (outside Brisbane metro)