

# Recovery Support for Independent Arts Organisations

## Form Preview

### Applicant details

\* 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](#).

#### Please read the following to help in completing this form:

- [Program Guidelines](#)
- [Arts Queensland General FAQs](#)
- [Recovery Funding - Sustain FAQ's](#)
- [Terms of Funding](#)
- [Important Information for Applicants](#)
- Data Dictionary
- Arts and Cultural Investment Framework found on the [AQ website funding page](#)

For general advice on funding applications visit our [Arts Acumen](#) page or download the [Funding Application Toolkit](#).

### Applicant contact details

**Organisation name \***

Organisation Name

**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.

# Recovery Support for Independent Arts Organisations

## Form Preview

**Daytime contact number \***

Please enter area code

**Mobile phone number**

Must be an Australian phone number.

**Organisation website**

Must be a URL

**Primary contact email \***

Must be an email address.

**Legal status (e.g. Incorp. assoc.) \***

**Contact person for this application \***

Title      First Name      Last Name

<input type="text"/>	<input type="text"/>	<input type="text"/>
----------------------	----------------------	----------------------

**Position in the organisation \***

**Contact number \***

Must be an Australian phone number.  
Please enter area code

**Contact email \***

Must be an email address.

**Have you been successful in receiving operational funding support as part of the Arts and Cultural Recovery Package \***

Yes

No

Please note that this will be taken into consideration as part of the assessment process.

**Please specify program name (e.g. Live Music Venue Support program) \***

State Electorate and Local Government Area (LGA)

**Select your State Electorate. To scroll quickly you can start typing the State Electorate name. \***

Search your address on the Electoral Commission Queensland website to find your electorate.

**Select your Local Government Area (LGA). To scroll quickly you can start typing the LGA name. \***

# Recovery Support for Independent Arts Organisations

## Form Preview

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

### Statistical information

Information in this section is not used to assess your application. Information you provide will be aggregated and used to review access to Arts Queensland funding programs.

If you are an individual applicant, do you personally identify as belonging to any of the groups below? If you are a group or applying as an organisation, does your group/organisation primarily exist for any of the groups below? (Tick only those that apply)

#### Dose your organisation identify with any of the groups below?

Aboriginal peoples

People from culturally and linguistically diverse backgrounds

Torres Strait Islander peoples

Older people (over 55 years of age)

Australian South Sea Islander peoples

Youth (12 - 25 years of age)

Regional Queenslanders

Children (0-11 years)

People with disability

LGBTIQ+

# Recovery Support for Independent Arts Organisations

## Form Preview

Only complete the section below if your project **specifically and directly** targets people from one or more of these groups.

**Is your project aimed at specific communities as participants and/or audiences?**

- |  |  |
|--|--|
| <input type="checkbox"/> Aboriginal peoples                    | <input type="checkbox"/> People from culturally and linguistically diverse backgrounds |
| <input type="checkbox"/> Torres Strait Islander peoples        | <input type="checkbox"/> Older people (over 55 years of age)                           |
| <input type="checkbox"/> Australian South Sea Islander peoples | <input type="checkbox"/> Youth (12 - 25 years of age)                                  |
| <input type="checkbox"/> Regional Queenslanders                | <input type="checkbox"/> Children (0-11 years)   |
| <input type="checkbox"/> People with disability                | <input type="checkbox"/> LGBTIQ+   |

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

## About your organisation

\* indicates a required field

**Provide a brief description of your organisation's work and recent artistic achievements.**

Word count:

Must be no more than 300 words.

Provide a short description (100 words recommended) of your project - what are you out to do?

**What was your organisation's turnover in the last full financial year?**

Year \*

Dollar \*

**What is your organisation's forecast turnover for the current year?**

Year \*

Dollar \*

Your organisation's current reserves position - Restricted

# Recovery Support for Independent Arts Organisations

## Form Preview

**What is your organisation's current restricted reserves position (\$)? Please include notes where relevant. \***

\$

Must be a dollar amount.

**Your organisation's current reserves position - Unrestricted**

**What is your organisation's current unrestricted reserves position (\$)? Please include notes where relevant. \***

\$

Must be a dollar amount.

**Total organisation's current reserves position**

**Total reserve position**

\$

This number/amount is calculated.

**What has been the financial impact of COVID19 pandemic on your organisation and its capacity to deliver an artistic program?**

Word count:

Must be no more than 300 words.

**How many staff do you currently employ?**

**Full-Time Equivalent (FTE)**

**Headcount**

## Assessment criteria

**Provide a response, with reference to the information contained in the Program Guidelines, to each of the following Assessment Criteria:**

*Note that this program is expected to be highly competitive. Successful organisations will clearly demonstrate a strong capability in delivering artistic work and achieving cultural outcomes, as well as evidence of engagement with and commitment to Queensland artists, effective partnerships, and audience engagement and demand.*

**Impact**

# Recovery Support for Independent Arts Organisations

## Form Preview

**What is the role of your organisation in Queensland's arts and cultural ecosystem? How does your organisation support artist employment and development? What are your organisation's plans to further re-engage audiences and deliver program activities once COVID-related impacts have eased?**

Word count:

Must be no more than 500 words.

### Quality

**What is your organisation's track record in delivering high quality arts and cultural outcomes? What evidence from audiences, artists, communities and / or experts demonstrates the value of your work?**

Word count:

Must be no more than 500 words.

### Viability

**What is the extent of income losses for your organisation as a direct result of the COVID19 pandemic? How has your organisation responded to the current environment to ensure adaptability and future sustainability?**

Word count:

Must be no more than 500 words.

## Grant budget

**Funding request:**

\$

Must be a dollar amount and no more than \$30,000. Specify how much you are requesting from Sustain: Independent Organisations.

How will this funding be used?

# Recovery Support for Independent Arts Organisations

## Form Preview

Complete the simple expenditure budget table below.

### Expenditure

Item	Amount (\$)	AQ breakdown amount (\$)
	\$	\$

### Expenditure Totals

Total Expenditure Amount

\$

This number/amount is calculated.

Total AQ breakdown amount (\$)

\$

THIS FIGURE SHOULD EQUAL YOUR FUNDING REQUEST AMOUNT

### Budget justification

**Provide an explanation for the level of funding requested and describe how it will be purposed in the 2021 to support ongoing operations and creative output.**

Word count:

Must be no more than 300 words.

### Support material

\* indicates a required field

Please note: Maximum 50MB of support material allowed.

- Letters of support must include an original signature or contact details of the author.
- All support material must be clearly labelled to ensure it is easy for the assessors to locate, open and read.
- Excessive support material will not be read by assessors and as such excluded from assessment.
- For audit purposes, Arts Queensland is required to retain a copy of the support material supplied by applicants.

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

**The following documents must be attached to your application.**

# Recovery Support for Independent Arts Organisations

## Form Preview

**Most recent signed audited financial statements (or equivalent), e.g. 2019, or 2018/19 or 2019/20. \***

Attach a file:

Recommended no more than 5mb per attachment.

**Current year forecast profit and loss statement, balance sheet and 12 month cashflow, inclusive of year-to-date figures \***

Attach a file:

Recommended no more than 5mb per attachment.

**Examples of work that demonstrate the quality of the programming and / or cultural outcomes of your organisation. This must include your 2019 artistic program and any other examples that demonstrate artistic output, including partnerships, over at least the past 12 months. \***

Attach a file:

This will be considered in the assessment process as evidence of your track record and role in the arts and cultural ecosystem.

### Links to support the applications

#### Link 1

Must be a URL.

#### Link 2

Must be a URL.

## Certification

\* indicates a required field

### All applicants

I, the undersigned, certify that:

- I have read and I/my organisation will abide by the Recovery Support for Independent Arts Organisations fund Program [Guidelines](#).
- The statements in this application are true and correct to the best of my knowledge, information and belief.
- The supporting material is my own work or the work of the artists named in this application.
- I acknowledge that, if I am successful, information provided in this application will form part of my funding agreement with Arts Queensland and I will be held accountable to deliverables outlined in this application.

# Recovery Support for Independent Arts Organisations

## Form Preview

- I have read, and my organisation is able to comply with, all of the requirements of the [Terms of Funding](#).
- I understand that if the application for funding is approved my organisation will be required to enter into a funding agreement that will be made up of the Letter of Offer, the Schedules and the [Terms of Funding](#).
- I consent that information provided in this application may be used for training, systems testing or process improvement purposes by Arts Queensland staff.
- I give permission for Arts Queensland to verify funding requested from other funding agencies in support of this project and to provide information in this application to those funding agencies for this purpose.
- I give permission for Arts Queensland to forward my information to the most appropriate industry experts or Government representative.
- If this application is approved, I 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 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

**The person submitting the application is the person who is authorised on behalf of the organisation to sign the contract and the Statutory Declaration and warrants they have authority to sign on behalf of the organisation.**

**Name \***

Title	First Name	Last Name
<input type="text"/>	<input type="text"/>	<input type="text"/>

**Position \***

**Date \***

Must be a date

## Contact Us

**[Arts Queensland](#)**

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

Street address: Level 16, 111 George Street, Brisbane QLD 4000

Postal Address: GPO Box 1436 Brisbane QLD 4001.

Email: [investment@arts.qld.gov.au](mailto:investment@arts.qld.gov.au)

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

