

24/25 Annual Funding for Organisations

Form Preview

About the grant

* indicates a required field

Instructions for applicants

Before completing this application form, you should have read:

- the program guidelines
- the [Frequently Asked Question's](#) available on the website

This is transitional funding as the Arts & Cultural Funding Program (ACFP) moves to the new reformed funding program. It is targeted for recent or current recipients' of ACFP Annual Organisation Funding. For more information on the new program please click here on this [link](#).

You should allow appropriate time to complete and review your application.

Incomplete applications and/or applications received after the closing date will not be considered.

First time applicant

Are you a first time applicant? *

Yes No

Your response will not affect your application.

Privacy Notice

By submitting this application form, the applicant acknowledges and agrees that:

- the Department is required to comply with the Privacy and Personal Information Protection Act 1998 (NSW) (the Privacy Act) and that any personal information (as defined by the Privacy Act) collected by the Department in relation to the program will be handled in accordance with the Privacy Act and its privacy policy (available [here](#));
- the information it provides to the Department in connection with this application will be collected and stored on a database and will only be used for the purposes for which it was collected (including, where necessary, being disclosed to other Government agencies in connection with the assessment of the merits of an application) or as otherwise permitted by the Privacy Act;
- it has taken steps to ensure that any person whose personal information (as defined by the Privacy Act) is included in this application has consented to the fact that the Department and other Government agencies may be supplied with that personal information, and has been made aware of the purposes for which it has been collected and may be used.

24/25 Annual Funding for Organisations

Form Preview

Create NSW updates

Do you wish to receive updates from Create NSW? *

- Yes No

These updates will be about other grant opportunities, initiatives or events. It may also include communication about your application. Your response will not affect your application.

Eligibility

* indicates a required field

Eligibility Questions

To check if your organisation is eligible to apply for this grant round, complete the questions below:

What best describes your organisation? *

- | | |
|---|---|
| <input type="radio"/> Educational Institution | <input type="radio"/> Organisation located in NSW |
| <input type="radio"/> Key Festival | <input type="radio"/> Organisation based outside NSW |
| <input type="radio"/> Local Government Authority located in NSW | <input type="radio"/> State Significant Organisation |
| <input type="radio"/> National Performing Arts Partnership organisation | <input type="radio"/> State/Federal Government Department or Agency |

Preference may be given to NSW based organisations

Is your program clearly related to the arts and cultural industry? Your program will need to either employ NSW artists and/or cultural workers or provide arts and cultural experiences to the people of NSW. *

- Yes No

Have you received Create NSW funding for the same stage/phase of this program or for additional funding to deliver this program (top up)? *

- Yes No

Funding for a new stage of a program will be considered.

Is your program for filmmaking, screen productions or film festivals? *

- Yes No

Please refer to [Screen NSW](#) for film industry opportunities.

Are you receiving Multi-year funding or Annual Program funding from Create NSW for the same period? *

- Yes No

Has your program commenced or already taken place? *

- Yes No

Unable to continue

Based on your response to the above Eligibility question, you are unable to continue. Refer to the guidelines for more details.

24/25 Annual Funding for Organisations

Form Preview

Create NSW staff are here to help you and can be contacted between 9am and 5pm Monday to Friday (excluding public holidays) via:

- Telephone: (02) 9228 4578
- Scheduling an online meeting to speak to Create NSW staff using the link to [Microsoft Bookings](#)
- Email: arts.funding@create.nsw.gov.au

Eligibility Confirmation

Please declare that this application meets the program eligibility criteria:

I confirm that I've read the guidelines and the information supporting our organisation's eligibility is accurate. *

Yes

Organisation Contact Details

* indicates a required field

Please ensure that your Organisation Name is the same as the Entity Name as per the Australian Business Register (ABN).

Organisation Details

Organisation Name *

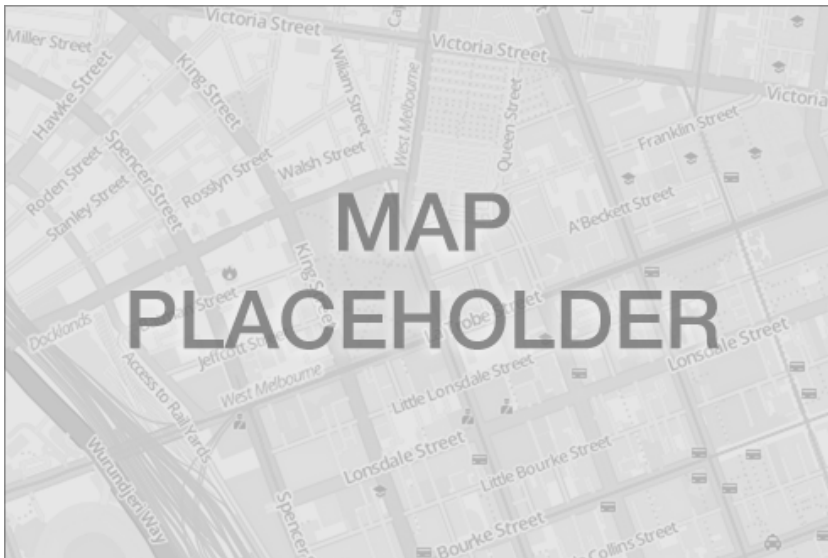
Organisation Name

Please use the organisation's full name. Make sure you provide the same name that is listed in official documentation such as that with the ABR, ACNC or ATO.

Primary Address

Address

24/25 Annual Funding for Organisations Form Preview



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Postal Address

Address

Primary Phone Number *

--

Must be an Australian phone number.
Country code not required, area code for landlines is required.

Other Phone Number

--

Must be an Australian phone number.
Country code not required, area code for landlines is required.

Email Address *

--

Must be an email address.

Website

--

Must be a URL.

Does the applicant organisation have an Australian Business Number (ABN)? *

- Yes No

ABN *

24/25 Annual Funding for Organisations

Form Preview

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	More information
ACNC Registration	
Tax Concessions	
Main business location	

Must be an ABN.

Organisations/LGA's are **required** to have an ABN to apply for this grant.

The following ABNs **will not be accepted**:

- Individual/Sole Trader
- Partnership
- Unincorporated Entity

Contact Details

This is the person we will correspond with about this grant and should be the individual who is filling out this application form.

Name *

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

Position *

e.g., Manager, Board Member or Fundraising Coordinator.

Phone Number *

Must be an Australian phone number.
Country code not required, area code for landlines is required.

Email *

Must be an email address.
This is the address we will use to correspond with you about this grant.

24/25 Annual Funding for Organisations

Form Preview

Head of Organisation/LGA

Must be the **Chair, President** (Arts Organisation), **General Manager** or equivalent (Local Council).

Name *

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

Position *

Phone Number *

Must be an Australian phone number.
Country code not required, area code for landlines is required.

Email *

Must be an email address.

Business Unit Contact Information

Complete these details for the LGA Business Unit.

Name of Business Unit *

Organisation Name

Business Unit Address *

Address

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

Business Unit Postal Address *

Address

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

Phone Number *

Must be an Australian phone number.
Country code not required, area code for landlines is required.

Email *

Must be an email address.

Website

24/25 Annual Funding for Organisations

Form Preview

Must be a URL.

Business Unit Contact Person

Name *

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

Position *

Phone Number *

Must be an Australian phone number.
Country code not required, area code for landlines is required.

Email *

Must be an email address.

About your Organisation/LGA

Are you applying as a Service Organisation? *

Yes No

Are you a NSW First Nations organisation? *

Yes No

For a definition of this [please see the glossary page.](#)

Application Details

* indicates a required field

As this grant is for transitional funding, some organisations may apply for half a year to take them to 31/12/2025.

Please note the following:

- **Earliest start date:** 1 January 2025
- **Latest end date:** 31 December 2025

Title *

Word count:

Must be no more than 25 words.

Provide a name for your initiative. Your title should be short but descriptive.

24/25 Annual Funding for Organisations

Form Preview

Brief description *

Word count:

Must be no more than 50 words.

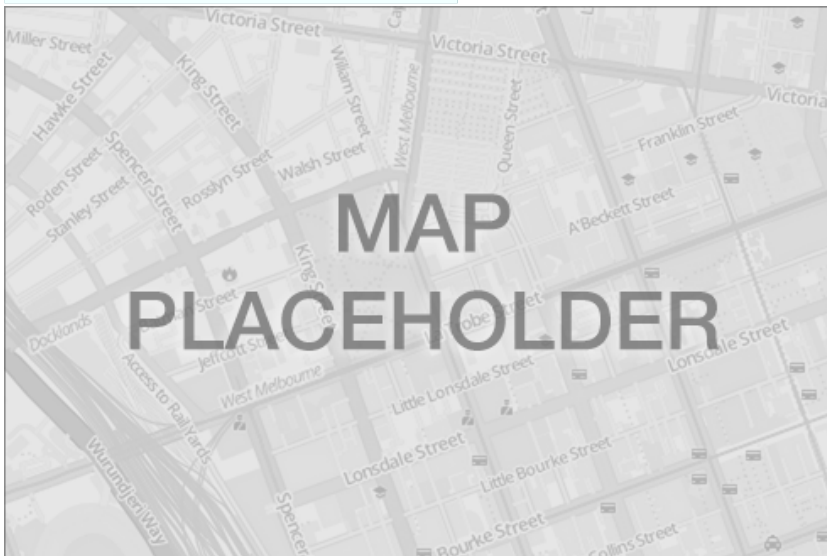
Include a brief summary of who will benefit from this initiative, what activities you will do and what outcomes you expect from your activities.

Anticipated start date *

Anticipated end date *

Primary location of your initiative

Address



Primary location does not need to be a specific address, and can be postcode, suburb, state, etc. If delivered online, please specify the area of focus for delivery.

Please update the start/end date

You have indicated above that your program either starts before 1 January 2025 or after 31 December 2025.

Please update the details to ensure your dates fit within these timeframes.

Breakdown of NSW Activity

24/25 Annual Funding for Organisations

Form Preview

Estimate the percentage (%) breakdown of where the **NSW** activity will take place.

% NSW activity in Sydney *

Must be no more than 100%.

% NSW activity in Western Sydney *

Must be no more than 100%.

% NSW activity in Regional NSW * Total % - MUST equal 100 *

Must be no more than 100%.

Artform

What Artform Board would you like the application to be assessed under? *

- | | |
|---|--|
| <input type="radio"/> Classical Music/Opera/Choral/Ensemble | <input type="radio"/> First Nations Arts & Culture |
| <input type="radio"/> Community Arts & Cultural Development | <input type="radio"/> Literature/Writing |
| <input type="radio"/> Contemporary Music | <input type="radio"/> Museums & History |
| <input type="radio"/> Dance & Physical Theatre | <input type="radio"/> Theatre & Musical Theatre |
| <input type="radio"/> Digital & Experimental, Immersive and Light Art | <input type="radio"/> Visual Arts |
| <input type="radio"/> Festivals | |

Contemporary Music applications will be assessed by the Sound NSW Board.

What is the primary artform for your organisation? *

Which one is your organisation? *

- Art Centre Artist Studio Gallery Gallery & Art Centre Gallery & Museum Museum Other:

Where is your gallery/museum located? *

- Regional Gallery / Museum located in Regional Area Regional Gallery /Museum located in non Regional Area Neither

First Nations Engagement

* indicates a required field

Connection to Country

On which First Nations Country/Countries is the majority of your program taking place on? Please select all that apply *

Disclaimer and Respectful Notice:

This list serves as a general guide, indicating the locations of larger communities, which may encompass smaller subsets such as groups, dialects, or individual languages. The list of Nations and boundaries provided are not intended to be precise or definitive.

24/25 Annual Funding for Organisations

Form Preview

We acknowledge and respect the potential variations in names and pronunciations across different communities and languages. We encourage applicants to approach this information with an understanding of these potential variations.

For comprehensive information about specific groups in a particular region, we recommend contacting the appropriate Local Aboriginal Land Councils.

If you're uncertain about the First Nations community or Nation, explore the [AIATSIS map](#) of Indigenous Australia to find the First Nations region.

First Nations Cultural Elements

Does your organisation support First Nations self-determination principles and adhere to relevant Indigenous Cultural and Intellectual Property (ICIP), NSW Aboriginal protocols and cultural safety in the workplace? *

Yes No

If successful you may need to provide evidence of this at contracting stage this may include: letters of support from communities, evidence of ICIP policies and procedures and acknowledgement of [NSW Aboriginal protocols](#).

For more information, please click on this link to read about the [Indigenous Cultural and Intellectual Property \(ICIP\)](#).

Are you adhering to the NSW Aboriginal Arts & Culture Protocols? *

Yes No

Refer to the [NSW Aboriginal Arts & Culture Protocols here](#).

Provide a rationale for why you are not referring to the principles of the NSW Aboriginal Arts & Culture Protocols *

Word count:

Must be no more than 250 words.

Merit Criteria

* indicates a required field

Questions

Tell us about the idea, vision, expected outcome/s, and locations of the proposed activities for this program *

Word count:

Must be no more than 300 words.

24/25 Annual Funding for Organisations

Form Preview

Tell us about the process of delivering the program, the artists and their involvement in the program, and their artistic experience *

Word count:
Must be no more than 300 words.

Supporting Documentation

* indicates a required field

Support Material

Provide samples of work as links or uploaded documents. All attachments must be provided at the time your application is submitted.

Samples can be submitted as:

- Written material - limit: 10 pages (provided as one document)
- Still images - limit: 10 images (provided as one document)
- Audio/visual - limit: 5 minutes each file, in electronic format, max 3 files

Restrictions on Attachments

- Files must not exceed 25MB
- Please provide attachments in .pdf format where possible.
- Zip files cannot be accepted.

Note: Assessors will not view or consider support materials that exceed the above limits.

How would you like to submit your samples of work? *

- Links/URLs
- Uploading files
- Both of the above

Link/URL Upload

Provide links and passwords to any externally hosted work samples that best reflect your organisation/LGA's experience and the proposed program.

Note: Make sure the link/URL works and passwords are correct and remain accessible for the next 6 months during the assessment period. Assessors will only be able to spend a limited time looking through links, so please ensure you choose the most relevant and strong works.

Link / URL	Password	Description
Must be a URL.		

File Upload

Attach samples of your organisation/LGA's work here *

24/25 Annual Funding for Organisations Form Preview

Attach a file:

A maximum of 3 files may be attached.

Letters of confirmation/offer/invitation/partnership

This can be letters of confirmation/support from the following who can confirm they are working with you on the program:

- Artist/s
- Organisations and/or
- Communities

It can also include:

- Letters of offer/invitations/partnership arrangements related to your program

Attach letters of support here *

Attach a file:

A maximum of 2 files may be attached.

Key Personnel

Provide the information below for the:

- Key artists, arts and cultural workers or collaborators involved in the program
- Key organisations/partners involved in the program

Name of key personnel involved		What is their role?	Have they been confirmed?	Attach their biography/CV
First Name	Last Name			
				A maximum of 1 file may be attached.

Impact Criteria

* indicates a required field

Strategic Priority Areas

Please indicate if your program will be targeted towards any of the priority areas listed below. This can include information about other artists, organisations and communities as partners, collaborators and audiences.

Note: it is not compulsory that your program engages with the following areas. Assessors will be looking for genuine and respectful engagement.

The definitions for the priority areas can be located [here](#).

First Nations stories and communities *

Western Sydney *

24/25 Annual Funding for Organisations

Form Preview

Yes

No

Yes

No

Accessibility and equity *

Yes

No

Broad and inclusive communities and content *

Yes

No

Regional NSW *

Yes

No

Next generation of creatives and audiences *

Yes

No

Impact of your program

Describe what changes (outcomes) you expect to see as a result of the program. These outcomes might include:

- **Audience impact-** e.g. increased access, attendance or participation
- **Artform impact-** e.g. innovation, advancement, employment, NSW works developed/presented/represented
- **Social impacts** - e.g. improved wellbeing, community and cultural development, increased visibility of issues, stories, or communities.
- **Operational impacts-** e.g. increase capacity, develop skills, deliver cost savings or enhance income generation

If the program engages with the needs of a community or has outcomes that benefit specific Create NSW priority area/s (indicated above), please include these details in your answer below.

Describe what changes (outcomes) you expect to see as a result of your program

*

Word count:

Must be no more than 300 words.

Please include Create NSW priority area impacts (if applicable)

Viability Criteria

* indicates a required field

Program plan

Tell us what are the key steps or activities to plan and deliver your program.

Activity	Brief description	Location	Expected start date	Expected end date
One per row. Add more rows if you want to list additional activities. Must be no more than 25 words.	Add notes if you need to provide more context. Must be no more than 50 words.	Where will your activity occur? Address Line 1, Suburb/Town, State/Province, Postcode, and Country are required.	Must be a date and between 1/1/2025 and 31/12/2025.	Must be a date and between 1/1/2025 and 31/12/2025.

24/25 Annual Funding for Organisations

Form Preview

Budget Information

Create NSW **does not** fund 100% of your program. You must contribute other cash or in-kind support towards your program. The definition of in-kind can be seen in the [glossary](#).

Funding is available between \$30,000 to \$200,000.

Here is a [template](#) which has been provided to assist you with calculating the below costs. You are not required to submit this template.

Total Amount Requested

*

\$

What is the total financial support you are requesting under this grant?

What is your total program cost? *

This is how much money the program will cost altogether and includes the amount requested from Create NSW.

Percentage of total financial support you are requesting in this application *

Please update the amount requested

You have indicated that the total amount requested is not in line with the maximum amount available for this grant.

Please update the details to ensure that you are requesting the correct amount.

Program Income

Funding or support that you may obtain to deliver your program. It can be estimated and can include potential/unconfirmed support.

Add \$0 (zero) for any that are not relevant. All costs are to be in whole numbers only.

Create NSW Funding *

Funds requested in this application

Other NSW Government funding *

Subtotal NSW Government *

24/25 Annual Funding for Organisations Form Preview

Other non-NSW Government funding *

This includes Commonwealth/Local Government funding (not NSW Government).

Total Government Funds *

This number/amount is calculated.

Earned Income (Performance / Exhibition / Core Activity) *

This includes box office, workshop fees and merchandise.

Donations and Sponsorship *

This includes philanthropic, donations and sponsorships.

In-kind *

All other income *

Total Income *

This number/amount is calculated.

Program Expenditure

What you need to spend to complete your program.

Add \$0 (zero) for any that are not relevant. All costs are to be in whole numbers only.

Wages, Salaries and Fees *

For artists, arts and cultural workers.

Direct Program Expenses *

Publication and Marketing *

24/25 Annual Funding for Organisations

Form Preview

Program Administrative Expenses *

Aboriginal Protocols Expenses *

This includes Indigenous Cultural and Intellectual Property (ICIP), Welcome to Country and Elders fees.

Accessibility Expenses *

To enable increased accessibility and inclusion to a program.

In-kind Expenses *

Must equal the in-kind income indicated above.

All Other Expenses *

Total Expenditure *

This number/amount is calculated.

IMPORTANT: The budget income and expenditure must balance at NIL (\$0.00).

Break-even *

This number/amount is calculated.

Budget Comments

Please provide information or comments related to your program budget *

Word count:

Must be no more than 250 words.

If this is not applicable, please place N/A in the textbox above.

Statement of financial position

When is your end of financial year? *

Must be for 30/06/2024.

Financial Statements

24/25 Annual Funding for Organisations

Form Preview

Please upload your most recent audited accounts (December 2023 or June 2024) here *

Attach a file:

A maximum of 3 files may be attached.

If your audited accounts include other controlled entities, then the figures entered into SmartyGrants should include them rather than just the parent entity.

Upload your Board/Committee approved balance sheet here *

Attach a file:

A maximum of 3 files may be attached.

This should be for 30 June 2024.

Assets

Please provide the figures below as at 30 June 2024.

Cash and cash equivalent *

Other current assets *

Noncurrent assets *

Total assets *

This number/amount is calculated.

Liabilities

Please provide the figures below as at 30 June 2024.

Current Liabilities *

Non current Liabilities *

Total Liabilities *

Risks and Dependencies

Please detail any risks or uncertainties in the delivery of the program, and how each of these will be managed.

Please include only one risk or dependency per row. Add more rows if you want to list additional risks or dependencies.

24/25 Annual Funding for Organisations

Form Preview

Risk or dependency description

How the risk or dependency will be managed

For example, you may require approval, have stretched resources, or time constraints for delivery. Must be no more than 250 words.	How the risk or dependency will be managed Must be no more than 250 words.
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Governance Arrangements

Outline the governance and management arrangements for this program *

Word count:

Must be no more than 300 words.

When answering the question below your response could include but is not limited to:

- Proactive recognition of health and safety issues
- Strategies to identify the early stages of burnout and overload
- Resources and/or policies in place to support ongoing well being.

Explain your Organisation/LGA's good governance arrangements to ensure staff and artists' health and wellbeing *

Word count:

Must be no more than 300 words.

Attach any documentation to support your organisation/LGA's well-being for staff and/or artists (optional)

Attach a file:

A maximum of 2 files may be attached.

Organisation/LGA Structure

Attach a copy of your organisations/LGA structure and governing body *

Attach a file:

A maximum of 1 file may be attached.

If you are applying on behalf of a Business Unit, then the structure would be of that Business Unit.

Outcomes

* indicates a required field

24/25 Annual Funding for Organisations

Form Preview

Your Organisation/LGA's Metrics

To see the definitions of the terms above, please refer to the [glossary here](#).

How many permanent staff (headcount) will you employ for this program? *

Number of paid audiences *

Number of unpaid audiences *

Number of digital audiences *

This is the number of people who log into standalone digital programs which may include online presentations, workshops, live streaming events for NSW artists/audiences.

Number of Participants *

A participant is paid and unpaid attendance at a workshop or other activity where they are actively engaged in making, creating, or learning. Digital and online participants are recorded separately.

Number of Artists / Cultural Practitioners and/or Museum Workers (part-time and/or casual) *

Artists, arts, and cultural workers must have a commitment to arts/cultural work as a major aspect of their working life, even if this work is not the main source of their income. The term is intended to indicate a degree of training, experience, or manner of working that allows their work to be assessed against the highest practiced standards in their relevant artform or discipline.

Declaration and Authorisation

* indicates a required field

Disclaimer

The applicant acknowledges and agrees that:

- Changes to the application and any additional materials cannot be submitted after the advertised closing date and time.
- Create NSW has the right to investigate any information provided in this application and/or to request for additional information.
- Create NSW may re-open an application after the closing date, provided it doesn't give the applicant an advantage over other applicants.

24/25 Annual Funding for Organisations

Form Preview

- Create NSW staff are not able to provide advice on content or choices required within my application.

Use of Information

The applicant acknowledges and agrees that:

- Subject to privacy legislation and **if successful**, the information provided in the application will be used for media and communication purposes by Create NSW and/or the NSW Government.

Declaration

Before you can complete and submit an application you must accept the following conditions by declaring:

- I have the authority to complete and submit this application on the entity's behalf.
- All information supplied as part of this application will be true and accurate to the best of my knowledge.
- All activities proposed by this application will be conducted in accordance with current legislation, including but not limited to, complying with Working with Children legislation.
- Funding will not be released if the applicant has outstanding acquittals for this or other projects/programs across Create NSW (including Sound NSW).
- Create NSW has the right to withdraw any offer of funding or demand the return of funds already paid if my declaration is found to be incorrect or misleading.

Authorisation

I agree *

Yes

Name of authorised person *

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

Must be a senior staff member, board member or appropriately authorised volunteer

Position *

Position held in applicant organisation (e.g. CEO, Treasurer)

Phone number *

Must be an Australian phone number.

24/25 Annual Funding for Organisations

Form Preview

We may contact you to verify that this application is authorised by the applicant organisation

Email *

Must be an email address.