Making an Application

Objective

The aim of the **Arts OutWest Country Arts Support Program (CASP)** is to support community arts and cultural development in Central West NSW through small grants.

Overview

CASP is an annual small grants program.

It is guided by the NSW Government's Arts Cultural Funding Program's three major objectives:

- Grow creative leadership and programming excellence in NSW
- Strengthen NSW arts and cultural activity that drives community and social benefits
- Showcase NSW as a leader for strategic arts and cultural governance and strong financial management

The fund is delivered in partnership with the 15 Regional Arts Development Organisations.

Arts OutWest's CASP 2025 round is focused on exciting, creative, community-based, locally-developed activities with outcomes that benefit people living in the Arts OutWest region.

Arts OutWest's CASP 2025 funds are primarily for the payment of artists and arts workers to undertake or manage arts activities in local communities.

Closing date

Applications close: Thursday 17 October 2024 at 5pm

Funding Amount

Grants of up to \$3000.

Timing

Projects are to take place between 1 January 2025 - 31 December 2025

Contact and Support

Refer to <u>Arts OutWest's CASP Funding Guidelines</u> for more details or contact an Arts OutWest staff member if you need any advice between 9am and 5pm Monday to Friday:

Telephone: 02 6338 4657 Email: artsoutwest@csu.edu.au

Accessibility

If you are an applicant with disability and you require this information in a format which is accessible to you, you can contact us between 9am and 5pm Monday to Friday.

Telephone: 02 6338 4657

Email: artsoutwest@csu.edu.au

Eligibility

Form Preview

* indicates a required field

Arts OutWest's Country Arts Support Program is available to people and organisations whose residence or main place of practice is within one of the 12 Local Government Areas (LGAs) of our service region.

Applicant LGA *	
 Bathurst Regional Council 	 Oberon Council
 Blayney Shire Council 	 Orange City Council
 Cabonne Council 	 Parkes Shire Council
 Forbes Shire Council 	 Weddin Shire Council
 Lachlan Shire Council 	Cowra Shire Council
 Lithgow City Council 	Other
 Mid-Western Regional Council 	

Please select your LGA based on your street address i.e. principal place of residence/business. If the LGA is not in this list, your area is not eligible to apply for CASP funding through Arts OutWest.

Unable to Continue

Based on your response to the Eligibility *Applicant LGA* you are ineligible to apply. Refer to **Arts OutWest's CASP Funding Guidelines** for more details or contact a staff member if you need any advice between 9am and 5pm Monday to Friday:

Telephone: 02 6338 4657

Email: artsoutwest@csu.edu.au

Applicants are expected to discuss their proposal with Arts OutWest staff before applying. This is to ensure that your chances of success are maximised and that people do not spend time on ineligible applications.

Have you discussed your project with Ar application is for an eligible activity? *	ts Out West and confirmed your
○ Yes	○ No

Unable to continue

Based on your response to the Eligibility Have you discussed your project with your Regional Arts Development Organisation or Create NSW? you are **currently** ineligible to apply. Refer to **Arts OutWest's CASP Funding Guidelines** for more details or contact a staff member if you need any advice between 9am and 5pm Monday to Friday:

Telephone: 02 6338 4657

Email: artsoutwest@csu.edu.au

Are you applying as: *

Local Government Authority located in NSW

Form Preview

- Group
- Individual
- Not for profit incorporated body
- Small Business based in NSW
- Other

Unable to continue

Based on your response to the Eligibility You are applying as: you are ineligible to apply.

Refer to <u>Arts OutWest's CASP Funding Guidelines</u> for more details or contact a staff member if you need any advice between 9am and 5pm Monday to Friday:

Telephone: 02 6338 4657

Email: artsoutwest@csu.edu.au

Is your project one of these activities? *

- A project previously funded through CASP
- O A project in which the core activity does not benefit communities or artists in the Arts OutWest region
- O A project that is not primarily arts or cultural activities
- O Competitions, prizes and adjudication fees
- A fundraising event
- O Core administration costs of an organisation
- O Activities that are part of the curriculum of schools
- Activities not occurring in the Arts OutWest region
- Core equipment purchases
- Capital works
- O Completed activities or activities that have already commenced
- None of the above

Unable to continue

Based on your response to the Eligibility *Is your project one of these activities?* you are ineligible to apply.

Refer to <u>Arts OutWest's CASP Funding Guidelines</u> for more details or contact a staff member if you need any advice between 9am and 5pm Monday to Friday:

Telephone: 02 6338 4657

Email: artsoutwest@csu.edu.au

Able to continue

Based on your responses to the above Eligibility Criteria you can now proceed and complete your application. Confirmation of eligibility will be determined upon submission of your application.

Form Preview

Would you like to proceed to complete your application? * ○ Yes ○ No

Unable to continue

Based on your response to *Would you like to proceed to complete your application?* it sounds like you are not yet ready to apply. You can save your application and come back later.

Refer to <u>Arts OutWest's CASP Funding Guidelines</u> for more details or contact a staff member if you need any advice between 9am and 5pm Monday to Friday:

Telephone: 02 6338 4657

Email: artsoutwest@csu.edu.au

Applicant Details

* indicates a required field

You have indicated that you are applying as an **Individual**. Please select Individual and fill out the questions below.

You have indicated that you are applying as a **Group**. Please fill out the questions below.

Select 'Organisation' and in 'Organisation Name' enter your group name (if you have one) or the names of the members.

You have indicated that you are applying as a **Not for profit incorporated body or a small business based in NSW**. Please fill out the questions below.

Select 'Organisation' and in 'Organisation Name' enter your organisation name.

If applying as a Local Government Authority, the Council's name and contact details should be provided as the Name of Applicant Group/Organisation.

If a Council facility (museum, gallery etc) or group is managing the project this information should be included in About Your Organisation.

If the ABN you're providing is for a Local Government Authority that Council should be shown as the Applicant, and Council's address and contact details provided here. Where applicable, other application contact details can be entered blow.

Arts OutWest Inc CASP 2025 Form Preview

Applicant *	○ Individ Organisa	dual Cation Name	○ Organisation	
	Title	First Name	Last Name	
	IF YOU AF	RE APPLYING AS A	A BUSINESS OR GROU	JP: Select
	'Organisa	tion' and put use	your business/ group	o name.

You have selected that you are applying as an *Individual* but you have selected you are applying as an *Organisation*. To continue select **Applicant** as **Individual** and ensure that the you fill in the **Title, First Name and Last Name**.

You have selected that you are applying as a *Not for profit incorporated body, Group, Local Government Authority* or *Small Business based in NSW* but you have selected you are applying as an *Individual*. To continue select **Applicant** as **Organisation** and ensure that the **Applicant Name** you provide is the name of your Organisation/Group or if you are a Group the name of **all** your group members.

Professional name (if applicable)				
Street Address * Address	Postal Addres Address	ss *		
Suburb State Postcode	Suburb	State	Postcode	
Phone *				
Email *				
Website				

Legal status of your organisation/ business / group

What is your organisation's legal status? *

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insurance.

□ Not for profit incorporated body □ Local government authorit Incorporated association □ Company limited by guarantee □ S (e.g. 355 committee) □ Unincorporated association Other Please select one	
About Your Organisation/ Business / Group	
Please provide a short description and history of your ground arts business, including examples of similar projects you have applicable). *	
Word count: Must be no more than 500 words.	
Applicant ABN. Find more details about applying and using www.abr.gov.au/ * The ABN provided will be used to look up the following information check that you have entered the ABN correctly.	•
Information from the Australian Business Register	1
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	
If the ABN you're providing is for a Local Government Authority that Council the Applicant, and Council's address and contact details provided above. It group that doesn't have an ABN but one of your members does you may wan 'Individual' and use their ABN. Find more details about applying and use www.abr.gov.au/	f you are applying as a vish to apply instead as
Do you have current Public Liability Insurance (to the cover O Yes O No, but will obtain See the FAQ section in the Arts OutWest CASP 2024 Guidelines for more in	n if successful

Successful applicants must p Certificate of Currency (minimate) Attach a file:	provide their current Public Liability Insurance mum \$10 million) *	
You can provide this to us if success Public Liability Insurance Certificate	sful in your application. Funds will only be released after receipt of of Currency	
Applicant Contact Person	ו	
Contact Name *	Title First Name Last Name	
Position *		
Phone Number (BH) *		
Mobile Number		
Email *		
Has your organisation previous (CASP)? *	ously applied for the Country Arts Support Program	
○ Yes	○ No	
About your Project		
* indicates a required field		
Project Title *		
Must be no more than 10 words.		
Brief description of the Proje	ect *	
Word count: Must be no more than 50 words. Please provide a short, one or two s 'What', 'Where' and 'When'.	sentence description of your project. Be sure to include the 'Who',	

In what town/locality will the event take place? *
Enter one or more towns/localities
Project Start Date *
Must be a date and between 1/1/2025 and 31/12/2025.
Project End Date *
Must be a date and between 1/1/2025 and 31/12/2025.
Select the primary artform of your program: *
Select the secondary artform that better reflects the subcategory of your primary artform: *
Description and the section of the s
Does your project involve Aboriginal cultural elements, community or heritage? * ○ Yes ○ No
If Yes, you are required to provide letter of support or other evidence and/ or contact details of referees from the relevant communities and/or organisations who are prepared to speak to your
experience and or your proposal. Refer to <u>NSW Aboriginal Arts and Cultural Protocol</u> . You can add
these in the next section.
What consultation has occurred with your community/communities (If applicable)? *
Word count:
Must be no more than 300 words.
PROJECT
Describe your project's in more detail (do not refer to attachments). Outline what
you plan to do and why. *
Word count: Must be no more than 300 words.
How will the project be managed? Please include a brief project plan and timeline.

Form Preview

Word count
Word count: Must be no more than 300 words.
Describe the planned public outcome of your project *
bescribe the planned public duteome of your project
Word count: Must be no more than 300 words.
Refer to the Arts OutWest CASP 2024 Guidelines for examples of 'public or artsoutwest.org.au/pf/casp/
Describe the short-term and long-term positive impact (cul economic) of this project on the regional community or on involved. *
involved.
Word count:
Must be no more than 300 words.
Project Details - Other Groups and Artists
* indicates a required field
Other Groups or Organisations involved in the Proje
Are any other groups or organisations involved in the proje
○ Yes ○ No
List the other groups or organisations involved in the projection ature of their involvement. *
Word count: Must be no more than 300 words.
Must be no more than 500 words.
Attach letters of support from these groups. * Attach a file:
Actuent a file.
Number of Artists

How many UNPAID artists will be involved in the project? *

How many PAID artists will be employed on the project? *

Does your project involve wor ○ Yes	king with children under the age of 18 years? * No				
Details of Artists involved (Complete where the project does not involve working with children under the age of 18 years)					
Provide details for each artist investattachments. To add another artist	olved in the project, paid and unpaid - do not refer to st click on ADD MORE.				
Artist Name *					
Brief Role Description *					
	Word count: Must be no more than 50 words				
Relevant Experience *					
	Word count: CV extract outlining their relevant experience. Must be no more than 100 words				
Details of Artists involved (Complete where the project involves working with children under the age of 18 years)					
Provide details for each artist involved in the project, paid and unpaid - do not refer to attachments. To add another artist click on ADD MORE.					
Artist Name *					
	Name of artist involved in the project				
Working with Children Check Number *	Details can be found on the Office of the Children's Guardian website: www.kidsguardian.nsw.gov.au				
Brief Role Description *					
	Word count: Must be no more than 50 words				
Relevant Experience *					
	Word count:				

Budget for your Project

* indicates a required field

Budget

CASP grants can be for a maximum of \$3,000.

Applicants are urged to cost their projects accurately and ask *only for what they need*. Value for money will be a part of the assessment of the budget. Please be aware that some successful projects could be allocated only part funding if budgets are not realistic or available funds are limited. Click here for our Budget Tips document.

Your Income should equal your Expenditure.

Total Cost of the Project (total expenditure including both CASH and IN KIND) *

Must be a whole dollar amount

Total Amount Requested from CASP (excl GST). *

\$

Must be a whole dollar amount (no cents) and no more than 3000.

Must be a whole dollar amount and not exceed the limit for your Region.

Other Income

Income (excluding the CASP requested amount)

\$

Must be a dollar amount.

This is other confirmed or expected income such as other funding, sponsorships, existing funds, ticket sales etc. A balanced budget will show 'total cost of project' (above) equal to 'Total amount requested from CASP' (above) + 'Other income'.

CASP Expenses

Please provide details of what the **CASP funds** in your overall budget will be used for. Remember that CASP should mainly go towards Artist/Artsworker fees and expenses.

Refer to the **CASP Funding Guidelines** for details of expenses that CASP will not fund.

The total of these amounts must be the same as **Total Amount Requested from CASP** and must not exceed the limit for your Region.

DO NOT INCLUDE here activity expenses paid for by 'other income'.

Add **0** for any that are not relevant.

Fees and Allowances - Artists *
\$
Must be a dollar amount.

Fees and Allowances - Arts Workers * \$ Must be a dollar amount.	Can also include travel, accommodation expenses and living allowances
Total Artist Fees and Allowances * \$ This number/amount is calculated.	
Total Production Costs * \$ Must be a dollar amount.	Production Costs - Details Can include materials, venue hire, equipment hire, costumes, fees for production staff (eg stage managers, lighting and sound technicians, set construction workers)
Administration - Amount * \$ Must be a whole dollar amount exclusive of GST	Administration Expenses - Details Can include general printing and stationery, audit fees, insurance, telephone, fax and other office expenses, travel (other than artists), auspice fee, fees for administrator / coordinator
Marketing - Amount * \$ Must be a whole dollar amount exclusive of GST	Marketing Costs - Details Can include costs of printing promotional material media advertising, video production, fees for marketing or promotional officer
TOTAL EXPENSES \$ This number/amount is calculated. Test that your budget balances - this sh \$ This number/amount is calculated. Outline how you have arrived at those for the short of	
Word count: Must be no more than 300 words.	

Form Preview

Identify any financial risks will manage these *	to the successful delivery of	of your project and how you
Word count: Must be no more than 300 words		
Budget Information (I	N KIND SUPPORT)	
In Kind Support		
	our project. You will only be ab to include as it shows the 'real	le to provide estimates of their cost' of your project.
Estimated number of volunteers	Estimated total number of volunteer hours	Estimated value of volunteer time
	(all volunteers combined)	This number/amount is calculated. This amount is calculated.
Local Government - goods,	, services that council provi	de without a fee
eg venue, rubbish service, admin	support, excluding GST	
	rvices that local business p	rovide without a fee
eg paints, materials, advertising,	excluding GST	
Other community groups - fee	goods, services that other	groups provide without a
\$		
-		
Total In Kind Support		
•		

Attachments and Support Material

* indicates a required field

Letters of Support

If you have any additional letters of support (other than from groups or organisations involved in the project, which you have already added in a previous section) you may upload them here.

Form Preview

Attached Letters Attach a file:	s of Support here	*				
Evidence of Support - For proposals involving Aboriginal people, cultural content or communities.						
You are required to provide at least one letter or referee of support from the relevant Aboriginal communities and/or organisations who are prepared to speak to your experience and or your proposal. Refer to NSW Aboriginal Arts and Culture Protocols for more information.						
Do you wish to provide your evidence by attaching/providing * ○ Letters of Support ○ Contact details of referees ○ Both						
Attached Letters of Support here * Attach a file:						
Name	Organisation	Relation project	nship to	Phone	Email	
Name	Organisation		nship to	Phone	Email	
Name	Organisation		nship to	Phone	Email	
Name Samples of Wo			nship to	Phone	Email	
Samples of Wo	ork	project	t material		Email pport your application.	
Samples of Wo	Ork ONE of the following selecting the relevant of written materials.	g support	t material	options to su		
You may choose OPlease indicate by • Up to 5 page research), OR • Up to 5 photo • A link to video	Ork ONE of the following selecting the relevance of written material graphs, OR	g support ant TYPE al (e.g. ex	t material to below. Excerpts of a YouTube,	options to su published wi	pport your application.	
You may choose OPlease indicate by • Up to 5 page research), OR • Up to 5 photo • A link to video	Ork ONE of the following selecting the relevance of written material graphs, OR of footage of work, here	g support ant TYPE al (e.g. ex	t material below. xcerpts of YouTube, site.	options to su published wi	pport your application. riting, press coverage or Box - Provide URL and	
You may choose OPlease indicate by • Up to 5 pageresearch), OR • Up to 5 photo • A link to video passwords to video operations.	Ork ONE of the following selecting the relevance of written material graphs, OR of footage of work, here	g support ant TYPE al (e.g. ex	t material below. xcerpts of YouTube, site.	options to su published wi	pport your application. riting, press coverage or Box - Provide URL and	
You may choose OPlease indicate by • Up to 5 pageresearch), OR • Up to 5 photo • A link to video passwords to video operations.	Ork ONE of the following selecting the relevance of written material graphs, OR of footage of work, here	g support ant TYPE al (e.g. ex	t material below. xcerpts of YouTube, site.	options to su published wi	pport your application. riting, press coverage or Box - Provide URL and	

Please provide support material documents in .pdf format where possible. Zip files cannot be accepted.

Form Preview

Attach written material or photographs here *	Attach a file:	
	Files must not exceed 25MB	
Link/URL *		
Password *		
	If no password required just write 'none'.	
Description *		

Declaration

* indicates a required field

Declaration of the Applicant Organisation

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

I certify that:

- **Authority:** If the applicant is a group, I have the authority to complete and submit this application on the group's behalf.
- **Valid information:** All information supplied as part of this application will be true and accurate to the best of my knowledge.
- **Legislative requirements:** 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.

I acknowledge that:

- **Deadline**: Application and any additional materials cannot be submitted after 5pm on the advertised closing date.
- **Investigation:** Arts OutWest and Create NSW have the right to investigate any information provided in this application and/or to request for additional information
- **Errors and Omissions:** It is solely my responsibility to ensure my application is correct and complete before submitting. Arts OutWest does not check, amend or update applications. Applications cannot be modified after being submitted.
- **Support**: Arts OutWest staff are available 9am-5pm Monday to Friday during the grant round to provide technical and general guideline advice.
- False declarations: Arts OutWest 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.

I am aware that recipients of the grant will be expected to interact with Arts OutWest and the other recipients through:

- Attending an online induction session.
- Acknowledging Arts OutWest and Create NSW in all materials associated with my activity.

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- Updating Arts OutWest about progress of the project, sharing photos and publicity
- Completing an acquittal form with documentation within three months of competing the project.

I agree that:

• If successful, images relating to this project can be reproduced by Arts OutWest and Create NSW for the purpose of promoting this grant, acquittal and annual reporting.

Yes	O No
Full Name *	
Typing your name will be taken to be	as binding as a signature.
Title/Position *	
General Manager, Chair, Executive Of	ficer etc.
Date *	

Do you understand and acknowledge these conditions? *

Please keep a saved copy of your application form and any related material for your records

A PDF of your submitted application form will be emailed to the registered email address of the person submitting this application.

Please keep a copy of the PDF and related material that you attached/uploaded to the application in a common area within your organisation. If your application is successful, you will need to refer to it during your acquittal process when the project is completed.