Domestic Market Travel Support Program 24/25 - AIDC 2025

* indicates a required field

Application Number	
This field is read only.	

Overview

Screen NSW has opened a competitive travel round to provide a limited number of NSW screen practitioners (working in factual) with funding support to attend the 2025 Australian International Documentary Conference, being held in Naarm, Melbourne from March 2-5, 2025.

There will be up to two places reserved for Aboriginal and/or Torres Strait Islander applicants.

Applications for the 2025 AIDC - Domestic Market Travel Support Program round open on **Monday 16 December 2024** and close on **Monday 6 January 2025 at 14:00.** All times are AEDT.

Your application will be competitively assessed against the following weighted criteria:

- Applicant Track Record (30%)
- Merit of the Opportunity (30%)
- NSW Cultural & Economic Benefit (20%)
- Participation & Diversity (20%)

Please read the Guidelines before applying, including for additional details on the assessment criteria.

AIDC Pass

Successful applicants will need to purchase their own pass for the conference.

Screen NSW can facilitate a reduced rate of \$895 including GST, which is a 10% discount, if you are awarded travel support and don't yet have your pass. Neither AIDC or Screen NSW will retrospectively facilitate partial refunds if you have already purchased a full-price pass.

Completing the application

- Remember to save the form on a regular basis
- Applications MUST be submitted prior to 2pm of the closing date
- If you require further information please email industry@screen.nsw.gov.au

Program Eligbility

Screen NSW general eligibility requirements can be found in the Screen NSW<u>Terms of Trade</u>, which should be read in conjunction with the <u>Program Guidelines</u>.

All applicants need to fulfil the following criteria:

- Be an early to mid-career practitioner with relevant experience in producing screen content
- Have a slate of market-ready projects to pitch
- Be a key creative on the project(s): producer, director, writer
- Be a NSW- based company or individual:
 - If an individual, the applicant must be over 18 and be a NSW resident (i.e., lived and operated in NSW for at least six months immediately before the date of application)
 - If a company, the company must be incorporated and registered in Australia and have its principal place of business in NSW for at least six months immediately before the date of application. Company applicants must nominate one person (traveller) and the traveller must be over 18 and be a NSW resident.
- Be an Australia citizen or full-time resident
- Have an Australian Business Number (ABN)

AIDC Eligbility

To be eligible for this round you must also:

- Be an Aboriginal and/or Torres Strait Islander practitioner, with relevant experience in factual taking part in AIDC's <u>Indigenous Creators Program</u> (preference may be given to those with market-ready projects); OR
- Be an early to mid-career practitioner with relevant experience in factual and you have been invited to pitch in one of AIDC's competitive programs, or have a slate of marketready projects to pitch

AND

• Be able to attend the entire conference from March 2-5, 2025

Eligibility Confirmation

I confirm that the applicant and project is eligible according to the criteria outlined in the Program Guidelines, Screen NSW Terms of Trade and above *

○ Yes

Applicant Details

* indicates a required field

Applicant Details

Applica Title	nt * First Name	Last Name
Applica Address	nt Primary Addro	ess
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	West Melboon	Little Lonsdale Street
	Part of the second	inthe Bourke Street
		■ Bos
Applica Address	nt Postal Addres	5 S
Applicar	nt Primary Phon	e Number *
	n Australian phone i ode not required, ar	number. rea code for landlines is required.
Applicar	nt Other Phone I	Number
	n Australian phone i ode not required, ar	number. rea code for landlines is required.
Applicar	nt Email Address	5 *

Must be an email address.

Applicant W							
Applicant C Organisation							
If none, please	write 'N/A'						
Applicant A	BN *						
The ABN prov				lowing	information	. Click Looku	ıp above to
	om the Austral	lian Business	s Register				
ABN Entity name							
ABN status							
Entity type							
	ices Tax (GST)						
DGR Endorsed							
ATO Charity T		<u>Moi</u>	re informatio	<u>n</u>			
ACNC Registra Tax Concession							
Main business							
Must be an AB							
Mast be all Ab	14.						
Applicant T ○ An Individ		○ Co	mpany (Pty	Ltd)	O P	roject team	
Have you re O Yes eg Developme			_ C	thin th No	ne last 2 fir	nancial yea	rs? *
Previous Screen NSW Funding							
Please detail	any funding	received fro	om Screen	NSW ir	n the last 2 f	inancial yeaı	s.
Please as many additional rows as needed.							
Screen NSW Program	Applicant Name	Project Title	Date of Applica	tion		Amount Received	Funding all acquitted
		If applicable	e. Must be date.	Э		If not approved,	

Traveller(s Please supply travellers. To	the details fo					please input \$0. Must be a dollar amount. u may apply f	or up to two	
Name								
Role *			□ Producer □ Writer □ Director					
Does the traveller identify with any of the following groups? *		☐ Pe backg ☐ Pe ☐ LG ☐ We ☐ Re ☐ No ☐ Pr Please	 □ Person with Culturally and Linguistically Diverse background (CALD) □ Person living with disability □ LGBTQIA+ □ Western Sydney □ Regional NSW □ None of the above 					
Is the travel resident? *	ler a NSW	i.e., liv	Yes i.e., lived and operated in NSW for at least six months immediately before the date of application					
Gender iden	tity *	Please		ide th	Binary nis information	O Prefer not to answer with the conse prefer not to a		
If prefer to s gender ident do so here								

Application Details

CV / Resume *

* indicates a required field

Please upload a recent CV.

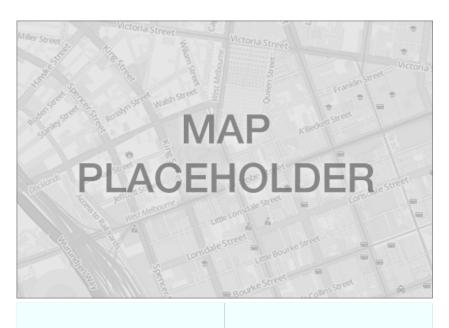
Attach a file:

Under **Title** please enter the name of the event you are attending and, if applicable, the name of the project with which you're attending.

Under **Anticipated start date** and **Anticipated end date**, please enter your anticipated travel dates.

Under **Primary location of your initiative** please enter the location of the event

Title *
Word count: Must be no more than 25 words. Provide a name for your initiative. Your title should be short but descriptive.
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 who 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.

Do you plan to participate in the Indigenous Creators Program? *○ Yes ○ No

Budget

* indicates a required field

Funding request

Funding request

Up to \$2,000 of grant funding is available.

Successful applicants will need to organise their own travel and accommodation and cover all travel costs up front. After contracting, they will invoice Screen NSW for the agreed sum to cover a portion of these expenses on the provision of an acquittal report at the conclusion of travel.

Screen NSW will provide one grant per company or individual applicant:

- For individuals, grants of up to \$1,500 ex GST will be available
- For companies or project teams, where two key creatives (producer, writer, director) are part of the application, grants of up to \$2,000 will be available. All applicants must be NSW residents and attending the same event. This is non-transferable to another company representative without prior approval from Screen NSW. Co-contributions from third parties are allowable for non-Screen NSW covered expenses.

Successful applicants will need to purchase their own pass for the conference.

Screen NSW can facilitate a reduced rate of \$895 including GST, which is a 10% discount, if you are awarded travel support and don't yet have your pass. Neither AIDC or Screen NSW will retrospectively facilitate partial refunds if you have already purchased a full-price pass.

Total Amount Requested *	\$ What is the total financial support you are requesting under this grant?
Supporting Documentat	tion
* indicates a required field	
Summary of Projects * Attach a file:	
	d. uding synopsis, stage of production, key creatives/production onfirmed financial partners. We are not requesting treatments or
Have you been invited to pitco O Yes (for example, The FACTory Internation	h in a competitive program? * O No onal Pitching Forum)
Please specify which program) *
Please provide the letter of in Attach a file:	nvitation *
Name of project(s) if applicab	ole
Declaration and Authori	sation
* indicates a required field	
Disclaimer	
The Applicant acknowledges and	agrees that:

- submission of this application does not guarantee funding will be granted for any project, and the Department expressly reserves its right to accept or reject this application at its discretion;
- they must bear the costs of preparing and submitting this application and the Department does not accept any liability for such costs, whether or not this application is ultimately accepted or rejected; and
- they have read the Funding Guidelines for the Program and has fully informed themselves of the relevant program requirements.

Use of Information

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

- if this project application is successful, the relevant details of the project will be made public, including details such as the names of the organisation (Applicant) and any partnering organisation (state government agency or non-government organisation), project title, project description, location, anticipated time for completion and amount awarded;
- the Department will use reasonable endeavours to ensure that any information received in or in respect of this application which is clearly marked 'Commercial-inconfidence' or 'Confidential' is treated as confidential, however, such documents will remain subject to the Government Information (Public Access) Act 2009 (NSW) (GIPA Act); and
- in some circumstances the Department may release information contained in this application form and other relevant information in relation to this application in response to a request lodged under the GIPA Act or otherwise as required or permitted by law.

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 at: https://www.dpc.nsw.gov.au/privacy);
- the information they provide 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;
- they have 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.

Declaration

By submitting this application form I hereby declare that:

- I agree for my project to be automatically considered in other NSW funding programs;
- I have read and understood each of the acknowledgements, agreements, representations and warranties provided above, and that each of these are true and correct;
- All information provided including the responses to each question in the relevant sections of this application is true and correct to the best of my knowledge;
- Any information contained in this application may be disclosed to other Government agencies, staff administering the program, and to external stakeholders (including consultants, lawyers and other advisers) as part of the assessment of this application;
- I have consent to provide information on behalf of any other individuals included in the application
- I understand that any false declaration may render this application ineligible/invalid;
 and
- All relevant conflicts of interest have been declared

Authorisation

I agree *	□ Yes						
Name of authorised person *	Title	First Name	Last Name				
	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. We may contact you to verify that this application is authorised by the applicant organisation						
Email *							
	Must be ar	email address.					