١.	16	rد	1/	16	W

* indicates a required field

Application Summary

 Guidelines Terms of Trade Application form, including the submission 	
If you have any questions, please contact us a	at screeninvestment@create.nsw.gov.au
Application Number	
This field is read only.	
Program Details	
The <u>Screen NSW Pathways Development Prog</u> in screen for creatives with disability. This init disability who may not meet the guidelines fo Screen NSW strongly encourages past recipie	tiative is open to emerging creatives with a or the Screen NSW Development program.
Grant Program Name	
This field is read only. The program this submission is in.	
Are you applying as a * O Writer	Producer
Writer Eligibility	
Writers must fulfil the following criteria:	
 Be a NSW resident Be a writer with disability. Screen NSW clinclusion Act 2014 	lassifies disability as per the NSW Disability
 For feature films you must have a confirr 	ned experienced script editor attached, for experienced tv writer on your team, for factuarienced researcher on your team.
Please confirm the writer * ☐ Is a NSW resident ☐ Is a writer with disability	

PΙ	ease	confirm the writer *
	ls a	NSW resident
	ls a	writer with disability

☐ Has a confirmed experienced script editor attached for feature, a confirmed experienced tv writer attached for drama series or a confirmed experienced researcher attached for factual projects
At least 3 choices must be selected.
Producer Eligibility
Writer eligibility:
 Be a NSW resident Be a writer with disability. Screen NSW classifies disability as per the NSW Disability Inclusion Act 2014
Producer applicants must fulfil the following criteria: * ☐ Be a producer who will undertake responsibility for producing the project ☐ Hold all necessary rights to make the project ☐ Ensure the project is written by a writer who meets "Writer Applicant" eligibility guidelines above. At least 3 choices must be selected.
Project Eligibility
The project is a narrative fiction or documentary project (as defined by ACMA). * \bigcirc Yes \bigcirc No
Disclaimer

The Applicant acknowledges and agrees that:

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

- Screen NSW will use reasonable endeavours to ensure that any information received in or in respect of this application which is clearly marked 'Commercial-in-confidence' 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 Screen NSW 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:

- Screen NSW 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.screen.nsw.gov.au/about-us/privacy-policy);
- the information it provides to Screen NSW 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 Screen NSW 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.

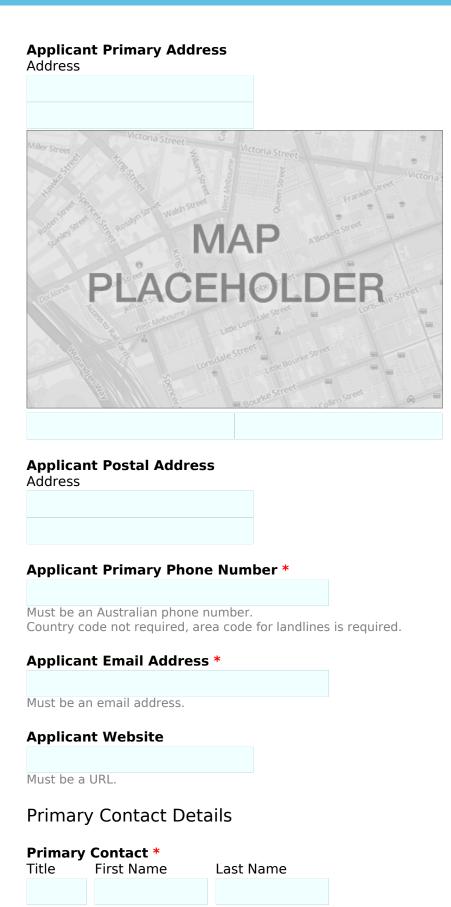
Contact Details

* indicates a required field

Applicant Details

Applican ○ Individu Organisat		O Or	ganisation	
Title	First Name		Last Name	

For organisations: please use the organisations full name. Make sure you provide the same name that is listed in official documentation such as that with the ABR, ACNC or ATO.



This is the person we will correspond with about the	nis grant.
Primary Contact Position *	
e.g., Manager, Board Member or Fundraising Coord	dinator.
Primary Contact Phone Number *	
Must be an Australian phone number.	
Country code not required, area code for landlines	is required.
Primary Contact Other Phone Number	
Must be an Australian phone number. Country code not required, area code for landlines	is required.
Primary Contact Email *	
This is the address we will use to correspond with	you about this grant.
Additional Contact (optional)	
Name	
First Name Last Name	
Role	
Phone Number	
Must be an Australian phone number.	
Email	
Must be an email address.	
Must be an email address.	
Applicant Company Details	
* indicates a required field	
Does the applicant organisation have an Yes	Australian Business Number (ABN)? * O No

Applicant Organisation 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 **More information ACNC Registration** Tax Concessions Main business location Must be an ABN. **Project Team** * indicates a required field Confirmed Key Creatives Which key personnel are confirmed for this project? * ☐ Writer (single) ☐ Writer (multiple) ☐ Producer ☐ Director Writer First Name * Last Name * Email * Phone *

Bio *							
Word count: Must be no more tha	n 250 words.						
Residency * ○ NSW ○ ACT	○ NT	O QLD	○ SA	O VIC	O TAS	○ WA	○ Outside Australia
Please select the First Nations Person with Cu Person living w LGBTQIA+ Western Sydne Regional NSW None of the about Prefer not to say Please only provide to not to say'. Gender Identity	Iturally and rith disability ey ove ay this information	Linguistica / on with the o	olly Divers	se backgro	und (CALC)) ise please	choose 'prefer
Female	○ Male	O N	Non-Binaı	ry 🔾 Pr answ	refer not to ver	o Ot	her:
Please only provide t not to answer'.	this informati	on with the	consent o	f the individ	ual, otherw	ise please	choose 'prefer
Writer (2)							
First Name *							
Last Name *							
Email *							
Phone *							
i iiolie							

Bio *		
Word count: Must be no more than 250 words.		
Residency * O NSW O ACT O NT O QLD O	SA O VIC O TA	S
Please select the Screen NSW Priority A ☐ First Nations ☐ Person with Culturally and Linguistically II ☐ Person living with disability ☐ LGBTQIA+ ☐ Western Sydney ☐ Regional NSW ☐ None of the above ☐ Prefer not to say Please only provide this information with the constnot to say'. Gender Identity *	Diverse background (CA	ALD)
	-Binary O Prefer no answer	t to Other:
Please only provide this information with the cons not to answer'.	sent of the individual, othe	erwise please choose 'prefer
Producer		
First Name *		
Last Name *		
Email *		
Phone *		

Bio *							
Word count: Must be no more th	nan 250 words	j.					
Residency * ○ NSW ○ ACT	O NT	O QLD	○ SA	O VIC	O TAS	○ WA	○ Outside Australia
Please select th First Nations Person with O Person living LGBTQIA+ Western Sydr Regional NSW None of the a Prefer not to select to say'. Gender Identity	fulturally and with disabilit ney / bove say e this informat	l Linguistic y	ally Divers	se backgro	und (CALD)	
○ Female	○ Male	0	Non-Binar	ry OPi ansv	refer not to ver) Ot	ther:
Please only provide not to answer'.	this informat	ion with the	consent of	f the individ	ual, otherwi	se please	choose 'prefer
Director							
First Name *							
Last Name *							
Email *							
Dis a ser all							
Phone *							

Bio *				
Word count: Must be no more than 250 words.				
Residency * ○ NSW ○ ACT ○ NT ○	QLD O SA O	VIC O TAS	o WA	○ Outside Australia
Please select the Screen NSW First Nations Person with Culturally and Lin Person living with disability LGBTQIA+ Western Sydney Regional NSW None of the above Prefer not to say Please only provide this information wont to say'. Gender Identity *	guistically Diverse ba	ackground (CAI	L D) wise please o	choose 'prefer
○ Female ○ Male	○ Non-Binary	Prefer not answer	to Oth	ner:
Please only provide this information was not to answer'.	with the consent of the	individual, other	wise please o	choose 'prefer
Additional Key Personnel				
Are there any additional key p ○ Yes	personnel working	on this proje	ct? *	
Additional Key Personnel				
First Name *				
Last Name *				
Role *				
Residency *				

Email *				
IMDb link				
Additional Bios or CVs				
If you would like to upload any Attach a file:	y additional	bios or CV's pleas	e do so her	e.
Project Details				
* indicates a required field				
Government Reporting				
 The below section is required for some clarifications on each quest Title: Title of your project Brief Description: should be Anticipated start date: Anti Anticipated end date: Anti Primary location of your in in. If you are unsure or it's not 	ion to help aid e a one sente ticipated start cipated end d nitiative: The	I your answers. nce synopsis date for this stage of main location your	of developm developmen project will b	ent t oe developed
Title *				
Word count: Must be no more than 25 words. Provide a name for your initiative. You Brief description *	ur title should b	e short but descriptive	2.	
Word count: Must be no more than 50 words. Include a brief summary of who will b outcomes you expect from your activ		initiative, what activit	ies you will do	and what
Anticipated start date *				
Anticipated end date *				

Primary location of your initiative Address Any, but at least one field is required. 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. **Development Stage** Synopsis: One Paragraph * Word count: Must be no more than 150 words. Current stage of development * Please specify the current draft number and date * Proposed next stage of development *

Intended Delivery	Date *		
Marablana data			
Must be a date.			
			elopment. Articulate ecific on how you are
Delivery materials above.	proposed for this sta	ge must reflect your	creative rationale
Please list your pro	posed delivery mate	rials, for example:	
which draft scree	development stage is on the stage is on the stage is controlled to deliverse the stage encompasses money all of the items.	ver i.e. third draft scree	enplay OR;
Please list them he	re *		
Platform and For	mat		
	e's primary release pla evision - O Television - o-air Pay	O Video O Vidoon Demand On Dem	mand
		(VOD) / Online (VOD) Content Content Provider - Free Provid	nt
☐ Factual Series☐ Factual One-off☐ Documentary Feat☐ Documentary One	-off	cribes the project. * ☐ Fiction Feature ☐ Fiction Telemovie ☐ Fiction Series ☐ Fiction Series (Sho	rt-form)
☐ Documentary Seri	es		
Genre * ☐ Action Adventure	□ Romantic Comedy	□ Mystery	☐ Contemporary and Social Issues including social history
☐ Comedy ☐ Drama	☐ Thriller☐ Western	☐ Science Fiction☐ Family	☐ History and Identity ☐ Science and Environment
☐ Horror	□ Crime	$\ \square$ Arts and Culture	☐ Other:
☐ Musical			

Duration (in minutes) *
For one-off productions this is the total duration of your project. For series, this is the duration of each episode. Must be a number.
Number of episodes (if applicable) *
Are children the primary audience for this project? (i.e. up to 18 years old) * ○ Yes ○ No
Please specify the primary audience group(s): * ☐ Preschool children ☐ Children in early childhood (kindergarten to year 3) ☐ Children in middle primary (years 4 and 5) ☐ Children in middle years (years 5 to 9) ☐ Children in senior years (year 10+)
Is your project a Children's 'P' or C' classification? * Yes, this is a Children's "P" classification project Yes, this is a Children's "C" classification project No, this is neither a Children's "P" or "C" classification project
Content Warning Information
Does your project contain potentially disturbing or upsetting content that would require a content warning for staff and assessors? *
O Yes O No O Unsure Examples of sensitive content include sexual assault, self-harm, violence. If you are unsure, please contact screeninvestment@create.nsw.gov.au .
Briefly explain the nature of the content. *
Word count: Must be no more than 300 words.

Diversity and First Nations Content

* indicates a required field

Consideration of Diversity

Screen NSW is dedicated to promoting fairness and equality in its programs and interactions with the community. Our main priorities include supporting increased participation in the

industry of people from underrepresented groups, including, First Nation's peoples, people from Culturally and Linguistically Diverse (CaLD) backgrounds, people living with disability, LGBTQIA+ people, Western Sydney and Regional NSW. Supporting this participation encourages genuine storytelling and fosters inclusivity.

Screen NSW believes it is crucial for the narrative and characters of projects it funds to reflect the lived experiences of diverse communities. Screen NSW values the cultural expertise of the creative team in conveying an authentic story. Therefore, when evaluating applications, we consider the cultural authorship of the creative team as a significant factor.

To effectively contribute to the cultural and economic well-being of the state of NSW, screen content should resonate with audiences. Embracing diverse ideas and fostering a diverse workforce will strengthen our local screen industry, and make it more relevant to local audiences and more competitive globally.

How does your project address meaningful on screen representation of diversity in terms of protagonists, themes and narrative? *
Word count: Must be no more than 350 words.
How does your project advance diversity in its project leadership and key creatives? *
Word count: Must be no more than 350 words.
How does your project advance diversity in its project leadership and key creatives? *
Word count: Must be no more than 350 words.
First Nations Content
First Nations content can mean that your project: • is based on or includes First Nations stories • has First Nations characters • features representations of First Nations culture.
Does the project cover Indigenous related themes or material? * ○ Yes ○ No

Pathways Development Program - Application Form

Screen NSW does not currently support projects with significant First Nations content without a member of the key creative team coming from an appropriate background.

If your project contains First Nations Content it will be ineligible if it cannot demonstrate appropriate Indigenous consultation and/or participation.

Please refer to Screen Australia's guidelines <u>Pathways & Protocols: a filmmaker's guide to working with Indigenous people, culture and concepts.</u>

Does the project ha ○ Yes	ve an Indigenous cor	nsultant? * No	
the names of releva	ant key creatives, cor e asked to provide ag	nmunities and advis	
Word count: Must be no more than 3.	50 words.		
First Nations Consu	Itant * Last Name		
i ii st ivaiile	Last Name		

Submission Materials

* indicates a required field

Project history

Next Stage Development Notes

These notes are a critical analysis of the current creative materials. They identify current challenges and the tools and approaches to explore and address these in the next stage(s) of development.

These notes express the creative vision for the project and you must consider the project within the wider context of genre, the marketplace and intended audience.

Development notes must be:

- Specific
- Articulate what is working in the current materials and what issues need attention, e.g. how will you "deepen the characters" or "rework the structure"
- Identify the next development steps

- Not be a stream of consciousness and we encourage applicants to use subheadings to demonstrate all aspects of the storytelling genre, structure, tone, characterisation, plot, story arcs, dialogue, theme, etc.
- 1 page in length.

Please upload	your	1 page	development	t plan	here *
Attach a file:					

Please adhere to the following naming convention for any uploaded materials: [PROJECT TITLE] - (e.g. THE SAPPHIRES - Development Notes). Max 25MB per file.

Story Documents

Please upload a one-page synopsis of your project. This should clearly articulate structure, tone, character arc and plot. *

Attach a file:

Please adhere to the following naming convention for any uploaded materials: [PROJECT TITLE] - (e.g. THE SAPPHIRES - Development Notes). Max 25MB per file.

Audience and Marketplace Statement

Please upload a one-page audience and marketplace statement. This should include your target audience and how you plan to reach that audience. * Attach a file:

Please adhere to the following naming convention for any uploaded materials: [PROJECT TITLE] - (e.g. THE SAPPHIRES - Development Notes). Max 25MB per file.

Budget and Previous Funding

* indicates a required field

Funding Request

Applicants can request up to \$30,000 from Screen NSW and the applicant or third party is expected to cover the difference between the Screen NSW contribution and the budgeted cost of the development. Requested amounts must be relative to the development stage and proposed activity.

The Total Project Cost is the estimated budget of the total production.

Total Project Cost *

\$

What is the total budgeted cost (dollars) of your project?

Total Amount Requested *	\$ What is the total financial support you are requesting under this grant?
Total cost of this stage of de \$ Must be a dollar amount.	velopment *
Co-funding Contributors	
Do you have any third-party development? * ○ Yes	co-funding contributors for this stage of
Itemised Budget	
Funding requests could include: Series (Fiction) Writers room costs (Writers Writers' fee for series bibles Producer fee Feature (Fiction) Writer's fee for treatment Producer fee Script editor fee. Feature & Series (Factual) Researcher Fees Writer's fee for pitch deck a	
 Producer Fee. Development budgets canno 	t include funding for:
 Office overheads Legal fees Option fees Items already expended price Graphic design or printing of Catering costs for writers' resident 	or to applying for development funds osts associated with a pitch deck

Must be a dollar

amount.

Any co-funding Screen NSW

Must be a dollar

amount.

Item total

Applicant

amount.

contribution

Must be a dollar

Item

		This number/ amount is calculated.
\$	\$ \$	\$
\$	\$ \$	\$
\$	\$ \$	\$

Applicant contribution total	Total co-funding contribution	Total amount requested from	Budget total
\$	\$	Screen NSW in this application \$	\$
This number/amount is calculated.	This number/amount is calculated.	This number/amount is calculated. e.g. Production Finance - Regional Filming Fund	This number/amount is calculated. This figure includes your funding request from Screen NSW, your own contribution and any third party contributions for this stage of development.

Previous Funding

Has this project receive	d development	funding from	m Screen I	NSW or ar	y other
sources? If yes, please	provide details	below. *			

☐ Yes ☐ No

No more than 1 choice may be selected.

This includes Create NSW.

Funding Submissions

Please detail any current or previous funding submissions for this project:

Date of application	Organisation / agency	Program	Result	If successful, amount received
Must be a date.				Put "\$0" if 'unsuccessful' or 'pending'. Must be a dollar amount.
				\$

Total amount received\$
This number/amount is calculated.

Ownership of the Project

* indicates a required field

Copyright and Chain of Title

To be eligible for development funding, you must have the rights to develop the project. Please consider the below before you submit your application:

- Is the project your original work?
- Are you the writer, or do you have an agreement with the writer?
- Is the project based on an underlying work (eg. novel, play) written by someone else? If so, do you have the rights to use that work as the basis for development of the project?
- If your project is based on any underlying work, do you have an agreement? Do the terms and conditions of the option agreement give you the exclusive right to:
 - have an initial option period to develop the project of at least 12 months; and
 - be able to extend the option twice, each for a period of at least 12 months?

Underlying Work

Is this project based on any underlying v ○ Yes	work?
Title of the underlying work *	
Type of underlying work *	
i.e. book, short film	
Author of underlying work *	

How do you hold the rights? *

- O The project is your original work, and you own all rights to develop the project
- O The project is not your original work but you have written agreements that grant you the rights to develop the project (e.g. writer's agreement; option agreement)
- O You share rights in the project with someone else (e.g., co-production agreement; co-writers agreement)

Chain of Title

The project is not your original work but these written agreements grant you rights to develop the project (e.g. writer's agreement; option agreement):

Type of agreement	Date the agreement Parties to the		Your rights
	was signed	agreement	
e.g. option agreement,	e.g. 1 Jan 2023. If the	e.g. Between applicant	e.g. length of option,
writer's agreement, etc.	agreement is unsigned	company or individual	extension period, etc.
		(Nguyen Pty Ltd) and	

Co-Production

You share rights in the project with someone else under the following arrangements (e.g., co-production agreement; co-writers agreement):

Type of agreement	Date the agreement was signed	Parties to the agreement	Your rights
e.g. option agreement, writer's agreement, etc.			e.g. length of option, extension period, etc.

Please upload	any option	agreements	ner
Attach a file:			

Privacy Statement and Applicant Declaration

* indicates a required field

Declaration

- I have read the <u>Guidelines</u> and <u>Terms of Trade</u> relating to the Pathways Development Program.
- I declare that the information provided herein and in the supporting documentation submitted with this application is complete and accurate and will provide evidence of this if Screen NSW wishes to fund the project.
- I declare that I have only provided personal information (including priority area eligibility) on behalf of others with their consent.
- I warrant that I am authorised to sign this application form.

Note: You must ensure that all particulars you have supplied are true and correct and that you have not concealed information relevant to this application. In making this Application you are seeking a financial benefit. Under section 192G of the Crimes Act 1900, a person who dishonestly makes any statement that is false or misleading in a material particular with the intention of obtaining a financial advantage is guilty of an offence. In the event that the particulars you have knowingly supplied are false, Screen NSW may revoke any offer made in conjunction with this application and cease to consider any application (whether current or future) from you.

Screen NSW reserves the right to contact and discuss a project with all parties associated with an application, including but not limited to other funding agencies and the broadcasters approached by the applicant.

Authorisation

l agree *	□ Yes				
Name of authorised person *		First Name a senior staff memed volunteer	Last Name ber, board member or app	ropriately	
Position *	Position	held in applicant o	rganisation (e.g. CEO, Trea	surer)	
Phone number *	We may	an Australian phor contact you to ver pplicant organisati	ify that this application is a	nuthorised	
Email *	Must be	an email address.			