Up to \$20,000 Arts and Cultural Grant Application 2025-2026

Introduction and Eligibility

* indicates a required field

Introduction

The City of Stonnington's **Up to \$20,000** reflects our Creative Stonnington Plan's vision to be "A vibrant imaginative and inclusive city of culture, where people are inspired, informed and connected through creative expression and shared community." Spanning a broad range of art forms and practices, this grant supports inclusive, innovative, engaging, empowering, resilient and environmentally friendly projects. Collectively, these place value on the importance of our creativity and cultural identity, and strengthens the social, community and economic development of the City of Stonnington.

An applicant must be either an incorporated not-for-profit organisation or, if not, an individual artist or organisation who has entered into an auspice arrangement. The auspice organisation must be an incorporated not-for-profit organisation, and they will manage the funds and distribute them to you. More details about auspicing is available in the Program Guidelines.

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Eligibility

To be eligible to apply for a Grant, an organisation must meet all required eligibility listed below:

- has read and understands the program guidelines
- is able to demonstrate alignment between their project and the aims of this program
- is a not-for-profit organisation or artist/s
- is incorporated, or is auspiced by an incorporated organisation for the purposes of this application
- will deliver the project within the City of Stonnington
- is able to demonstrate financial viability
- does not have any pending acquittals, debts or reports owing to the City of Stonnington
- has the appropriate type and level of insurance for the activities that are the subject of this grant

You must select one option, otherwise you are not eligible to apply for a grant.

I declare which type of applicant I am:

- Incorporated not-for-profit organisation
- Individual or community group with an auspice arrangement

Declaration

I declare that I have read and understand the Grant Guidelines and other relevant City of Stonnington Plans and confirm that I am eligible to apply for this grant. *

Yes

Applicant details

* indicates a required field

Applicant - Incorporated not-for-profit organisation

Organisation * Oldividual Organisation Name		○ Organisation		
Title	First Name		Last Name	
	ition name ' tion Name	*		

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 Bus	iness 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	

Must be an ABN.

Organisation Primary Address *

Address

Org	ganisa	ation Primary	Phone N	lumber *	
Mus	st be ar	n Australian phon	e number.		
O==	!	ation Drives w.			
Org	yanısa	ation Primary	Eman *		
Mus	st be ar	n email address.			
Org	ganisa	ation Primary	Website	*	
Mus	st be a	URL.			
Do	es yo	ur organisatio	n collec	t GST? *	
	Yes	J			
Ш	No				
		ategorise you	r organ	isation as	a:
		rganisation ral organisation			
		tion organisation	n		
	Other:				
A ++	ach a	rocent convic	of vour /	Annual Par	ort *
	ach a f	recent copy of file:	n your A	annuai kep	oort "
		_	_	- •	
	tach a ach a 1		organisa	ation's ope	erating budget *
	t ach n ach a f		our org	anisation's	last Annual General Meeting
, (СС	acii a i	inc.			
Pro	oject	Contact			
- , .	_ !_ !!		:II Is a 11	Lance and the	f
Thi	s is the	e person who w	III be the	key point o	f contact for the project.
		Contact *			
Titl	е	First Name	Last I	Name	

Position *			
Pronouns *			
Phone Number *			
Must be an Australian phone num	iber.		
Mobile *			
Must be an Australian phone num	her		
mast be an Australian prione ham	DCI.		
Email *			
Must be an email address.			
Applicant - Individual	or group with	h an auspice a	rrangement
* indicates a required field	3 1		3
indicates a required neid			
Auspice Name *			
Organisation Name			
Auspice ABN *			
The ABN provided will be used check that you have entered t			Click Lookup above to
Information from the Australian E	-		1
ABN	ousiness register		
Entity name			
ABN status			
Entity type			
Goods & Services Tax (GST)			
DGR Endorsed			
ATO Charity Type	More information	on	
ACNC Registration			
Tax Concessions			
Main business location			

Must be an ABN. You can check your ABN number at https://abr.business.gov.au/
Auspice Address Address
Auspice Website *
Must be a URL.
Attach a letter from the auspicing organisation confirming this arrangement is valid and current. * Attach a file:
Letter must be signed by an appropriately authorized person (e.g. manager CEO, Beard Chair) and
Letter must be signed by an appropriately authorised person (e.g. manager, CEO, Board Chair) and must include, name, position, signature and date.
Auspice Project Contact
This is the person who will be responsible for managing the auspice arrangements.
Project Contact Name *
Title First Name Last Name
Position *
Phone Number *
Must be an Australian phone number.
Email *
Must be an email address.
Mobile *
Must be an Australian phone number.
About your yourself or group
Do you categorise you or your community group to be a: * □ Arts-based community group

☐ Cultural community group☐ Established artist☐ Emerging artist☐ Other:	
Tell us about yourself or your organis	sation *
Word count: No more than 75 words. What do you do? Wha	at is your purpose?
Project Summary	
* indicates a required field	
Please provide a name or title for you	ur project *
Provide a name for your project/program/initia	tive. Your title should be short but descriptive.
Please provide a short summary of yo	our project *
what you will do (i.e. the activities you will per from your activities (outcomes). Go to the Fund	
In 50 words or less, please provide a	snapshot of your project *
Word count: We use this for marketing and promotional pur	rposes.
Please select the art form your project Dance Theatre Visual Arts Circus/ Physical Theatre Live Art No more than 1 choice may be selected.	ct will cover: * Cabaret Inter-disciplinary/ hybrid Festivals Music Digital media/ Film

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Please indicate the venue/s or location/s where your project or event will be

delivered? *

Word count: Must be no more than 50 words. Please provide the name and address of venue/location
Project Start Date *
Projects cannot commence prior to 1 July 2025
Project End Date *
projects must end before 30 June 2026
Key Project Dates
Performance/exhibition/workshop dates
Are you applying for any in-kind City of Stonnington grants? If so, please outlin
Criterion 1: Artistic Merit
* indicates a required field
This criterion has a score weighting of 30%
Project Details
Please describe why does this project need to be done? Why Stonnington, why now? *
Word count: Must be no more than 100 words. How will the Stonnington community benefit from your project?
Please describe how your project will include and/or celebrate local or specific communities within the City of Stonnington? *
Word count: Must be no more than 100 words.

Please describe what sets your project apart from others (e.g. responsive to contemporary culture, innovation, originality, accessibility, social differences, equity)? *
Word count: Must be no more than 100 words. Demonstrate how your project is innovative.
Number of project collaborators *
Must be a number. How many people are collaborating on the project?
New or Existing Project
Is this a new or existing project? * O New O Existing
Is the project new to the City of Stonnington or previously supported by this council? * New to Stonnington Previously supported by Stonnington
What lessons have you or your organisation learned, and what changes have you made to ensure the project continues to be innovative? *
Word count: Must be no more than 150 words.
What lessons and knowledge, and community benefit, do you hope to gain by delivering a new project?
Word count: Must be no more than 75 words.
Outcomes and Evaluation
Please describe what the expected outcomes of this project are *
Word count:

Must be no more than 100 words.

Please describe how you will know if these	outcomes have b	een achieved *
Word count: Must be no more than 100 words.		
Please outline how will you measure wheth surveys, research, attendance levels, partic		
Word count: Must be no more than 50 words.		
Gender Equality		
Please indicate whether your project will accompany of the second of th	ddress gender ine	equality *
Please describe how will you address the n and management of your project? How will genders adequately? *		
Word count: Must be no more than 100 words. We want you to sho in designing your project/program and how you will as will know if you've catered for all genders adequately genders) and how you will measure the gender split o specific initiative, please tell us why only one gender applying a gender lens to your work, visit		

☐ Culturally and linguistically diverse people
□ People living with disability□ LGBTIQA+ people
☐ Other:
Please outline how you project directly involves or supports these communities
ricuse outline now you project uncerty involves or supports these communities
Word count:
Must be no more than 100 words. Please outline any specific activities or services that will include, celebrate or cater to the above communities (e.g. Auslan interpreted events, relaxed performances etc.)
Artistic Support Material
* indicates a required field
This sections is part of Artistic Merit, this criterion has a score weighting of 30%.
The provision of artistic support material helps us to better understand your project, and established or emerging skills that individuals or organisations have. It is also an opportunit to provide information about artists that will be involved in the project and submit support letters which highlight your ability to deliver the project.
 Please provide examples of current, proposed or past work (these may be items that you or your organisation have, but it can also be held by people that will play key roles in delivering the project). The following items are strongly suggested that you provide, however you may not necessarily need to present as your project does not relate to them. Images (up to 3)
 Show reels/ moving image excerpts (up to 3 minutes, submitted as direct URLs, including relevant passwords) Script excerpts (up to 5 pages)
 Audio tracks (up to 2, submitted as direct URLs, including relevant passwords) Direct website links (up to 2)
Key artist bios (max. 150 words per artist)Support letters (up to 2 letters)
 Festival support letter (if the project is proposed as part of a festival) Reviews of past projects (up to 2 articles, case studies or other types)
Please submit all artistic support material as one PDF file. There is a maximum file limit of 25MB, however we recommend that you try to keep files under 5MB.
Artistic Support Material * Attach a file:
Please submit all artistic support material as one PDF file. There is a maximum file limit of 25MB, however we recommend that you try to keep files under 5MB. Artistic Support Material *

Our preference is for all artistic support material to be uploaded as one PDF.
Please outline why these support documents are relevant for your project? And if you had difficulty providing any of these please explain why. *
Word count: Must be no more than 100 words. Outline how it demonstrates the potential of the proposed project by demonstrating the strength of the artist or organisation's practice and community engagement
Criterion 2: Capacity and Viability
* indicates a required field
This criterion has a score weighting of 20%
Ticketed Events and/or Project Activities
Some projects will include performances or exhibitions that are open to the public or closed. But not all projects will, and instead focus on other types of activities.
Will your project involve ticketed events (e.g. performance, exhibition) and/or community project activities (e.g. learning and development, community practice, other): * Ticketed event/s Project activities Both ticketed event/s and community project activities Not applicable
Dates and Ticketing
What are the performance/ exhibition dates? *
Word count:
Please describe your ticketed event and benefits it will deliver for you, your organisation and/or the community? *
Word count: Must be no more than 150 words.
What types of tickets will be available? *

□ Free

□ Purchased□ Both types
Please indicate if you will have different ticket types and prices associated with them *
Will you options for: Child, Concession, Adult, Standard ticket price
Ticket Price (Standard/Adult) *
Must be a number. You can provide either Adult or Standard Ticket Price per person
What is the total amount of tickets available to be sold during your event? *
Must be a number
Please indicate whether the event will involve key events (e.g. open and closing night, launch): * O Yes O No eg: Opening night, Closing night.
Please describe why you are or aren't offering key events. *
Word count: Must be no more than 100 words. Include dates and times etc.
Project Activities
This section is for applicants that aren't offering an event or performance, if you are offering other activities please fill out this section. If you are not, please write n/a
Please describe the activities your project will include. *
Word count: Must be no more than 100 words.
How will the project benefit you, your organisation, local community members, community groups and/or others? *
Word count: Must be no more than 100 words.

Estimated number of participants in your project?

Must be a number.
Please indicate whether the event will involve key events (e.g. launch, presentations): * Yes No Other:
Please describe why your project will or won't include key events *
Word count: Must be no more than 50 words.
Funding and Project Cost
* indicates a required field
Budget
This sections falls under Capacity and Viability
This criterion has a score weighting of 20%.
Helpful points to remember when requesting funding and working out your budget. The grant program can't support:
 projects that rely solely on the City of Stonnington for funding (i.e. applicants cannot apply for 100% of total project costs) capital purchase of an asset (e.g. furniture, IT equipment) over the value of \$1,000
Request amount from Council
Total Amount Requested * \$ Must not be over \$20,000. What is the total financial amount needed for your project?
Total Project Cost \$ Must be a dollar amount. What is the total budgeted cost (dollars) of your project?

Budget

All income and expenditure related to the project needs to appear in the budget, including **cash** and **in-kind**. When you have completed the budget the **Total Income** and **Total Expenditure** must **balance**. Please do not use cents in any of your figures.

Expenditure from the Stonnington grant must be noted in the City of Stonnington Column.

A budget template can be found here. Please use this template to complete your budget and attach below.

Budget * Attach a file:			
Please list any further budget notes relevant to your application below			
Word count: 100 words maximun			
Contingency			
The purpose of this question is to ascertain how resourceful and adaptable you and/or your organisation are.			
Please outline a contingency plan if you are only partially funded for this project or an unexpected situation occurs during the funding period. *			
Word count: No more than 75 words.			
Project Timeline			
Developing a Project Timeline is critical to your project's success. A Project Timeline is essentially a timetable of what needs to be done, by whom and when.			
It should describe crucial activities and milestones for production and development (e.g. booking performers, venue, holding participant activities, staging and equipment, evaluation methods), marketing (e.g. promotion, marketing design and printing) and administration			

Marketing

Attach a file:

Please attach a Project Timeline *

Please attach a Marketing Plan that outlines the promotional activities you intend to implement for your project.

tasks (e.g. reports, financial management, payments, contracts).

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A basic marketing plan template can be found here. Please use this template to complete

your Marketing Plan and attach below.

For further assistance please refer to our marketing plan Information sheet available here. What is your target audience? * □ Local □ Interstate ☐ Wider metro □ International □ Regional Marketing Plan * Attach a file: Venue If relevant, please attach a letter of support from the venue to confirm your tentative booking. Attach evidence of your tentative venue booking * Attach a file: Your tentative booking document should include the value of the booking in a dollar amount Public Liability Insurance Your organisation, or auspicing organisation, must hold current Public Liability Insurance of at least \$20 million to cover your project. Please attach the Certificate of Currency for your Public Libility Insurance * Attach a file: Date of expiry * Must be a date. Certificate of Incorporation (your organisation or the auspicing body) Please upload either your organizations' certificate of Incorporation or upload a note to say you are being auspiced * Attach a file:

Criterion 3: Community Engagement and Reach

* indicates a required field

This criterion has a score weighting of 20%				
Participation and Attendance				
Estimated participants in your project (if relevant)?				
Must be a number. if not relevant please put in 0				
Estimated audience attendance at events or exhibitions (if relevant).				
Must be a number. if not relevant please put in 0				
Estimated % local residents to attend events or exhibitions (if relevant).				
Must be a number. if not relevant please put in 0				
Estimated $\%$ of visitors outside of Stonnington to attend events or exhibitions (if relevant).				
Must be a number. if not relevant please put in 0				
Local Business Engagement				
Please describe how your project will engage with local businesses. *				
Word count: Must be no more than 100 words.				
Criterion 4: Benefit and Value				
* indicates a required field				

This criterion has a score weighting of 20%

Environment

Please outline how will you ensure your project is environmentally friendly and sustainable *
Word count: Must be no more than 75 words.
Community Wellbeing and Inclusion
Do you feel that your project will enhance social cohesion, wellbeing and a sense of inclusion? *
Word count: Must be no more than 75 words.
Networking and/or Community of Practice
Do you feel that your project will facilitate networking opportunities or Community of Practice engagement? *
Word count: Must be no more than 75 words.
Personal and Professional Development
Please describe how the proposed project will contribute to the development and/ or sustainability of the artists, organisations or participant's career/ practice? *
Word count:
Must be no more than 75 words.
Criterion 5: Alignment to Council
* indicates a required field

Alignment to Council Plan

This criterion has a score weighting of 10%

Stonnington's vision is to be a safe, inclusive and creative city; one where we celebrate our people, history and culture, and embrace a healthy and sustainable way of life. The direction that Council commits to pursue should be considered when applying for your grant. Listed below are key objectives in the Council Plan

	cate which Council's and Destination	Plan objectives your	project	aligns with. *
•	and desirable business	es		
	lace and character	-14.		
□ Active tra	insport and connected	city		
Please outli	ne how your project	supports Council str	ategies,	plans and services. *
Word count:	we then 75 weeds			
If yes please d	ore than 75 words. escribe			
Declaration	0. 0			
Declaration	311			
* indicates a	required field			
Privacy St	atement			
The personal	information requested	I on this form is being c	allactad k	ov Council for the
		der the Arts and Cultura		
used solely b	y Council for those prir	mary purposes or direct	ly related	d purposes. The applicant
		rovided is for these purp hone 8290 1333 for acc		
information.	Tivacy Officer off telep	11011e 0290 1333 101 acc	.ess and/	or amendment of the
Authorisat	tion of Application	1		
• L certify	that all details supplied	d in this application form	n and in t	he attached documents
are true a	and correct to the best	of my knowledge, and	that the a	application has been
		ge and agreement of th	ne manag	ement of the applicant
organisat • I have re	tion or auspicing organ ead the accompanying	auidelines		
		tonnington in the event	that any	information regarding
	cation changes or is fo			
 I understand that if the applicant organisation is approved for this grant, we will be required to accept the terms and conditions of the grant as outlined in the letter of 				
approval		ia contactions of the gran	ie as oaen	med in the letter of
I declare as	an Authorised Office	er that the information	on conta	ined in this form is
true and ac		er that the information	on conta	illied III tills form is
○ Yes				
Name *				
	irst Name	Last Name		
Decities 4				
Position *				

Pronouns *	
Phone Number *	
Must include area code	
Applicant Primary Email	
Must be an email address.	
Date *	
Must be a date	
Did you speak to arts & cultural grant o	fficer prior to submitting your application?
○ Yes○ No	
Feedback	
You are nearing the end of the application p click the SUBMIT button please take a few r	rocess. Before you review your application and noments to provide some feedback.
How easy was this online application property of the Very easy of Easy of Okay of Difficult of Very difficult	ocess?
Please provide us with your suggestion additions to the application process/for	