

## Visions of Australia Grant Application

### Visions of Australia Guidelines

Before starting this application you should ensure that you have read and understood the Visions of Australia Program [Guidelines](#).

We also recommended reading the [Frequently Asked Questions](#).

### Privacy statement

The Department of Infrastructure, Transport, Regional Development, Communications and the Arts will treat your personal information according to the [Privacy Act 1988](#) and the [Australian Privacy Principles](#). This includes letting you know:

- what personal information we collect
- why we collect your personal information
- who we give your personal information to.

We will use the information collected in this form to administer this grant under the Visions of Australia program. Your information will be provided to independent assessors as part of the assessment process. The contact details you provide in this form may also be disclosed to the Minister for the Arts, other Members of Parliament and the Australia Council. Your name, contact details and other personal information will not be provided to any other person or organisation unless it is required by law.

For further information about our privacy obligations, (including in relation to how to access or collect personal information or make a complaint) and our contact details for privacy matters, please see out [Privacy Policy](#).

The Australian Government may also use and disclose information about grant applicants and grant recipients under this grant opportunity in any other Australian Government business or function. This includes disclosing grant information on GrantConnect as required for reporting purposes and giving information to the Australian Taxation Office for compliance purposes.

As part of your application, you declare your ability to comply with the *Privacy Act 1988* and the Australian Privacy Principles and impose the same privacy obligations on officers, employees, agents and subcontractors that you engage to assist with the activity, in respect of personal information you collect, use, store, or disclose in connection with the activity. Accordingly, you must not do anything, which if done by the department, would breach an Australian Privacy Principle as defined in the Act.

### When to submit

This funding application is for activities that take place from 1 July 2025.

This funding round of the Visions of Australia program cannot fund any activity that will occur before 1 July 2025.

# Visions Application

## Form Preview

Applications can be submitted anytime from 9am Monday 20 January 2025 to 5pm Friday 14 February 2025 AEDST.

Funding outcomes are expected to be advised within three months of the closing date.

## Applicant information

\* indicates a required field

### Who Visions of Australia will fund

To be eligible for funding, applicants must:

- be an Australian incorporated organisation
- have as their principal purpose the arts and/or cultural heritage (usually defined in the organisation's Constitution or Articles of Association, and reflected in the Annual Report and Business Plans)
- have an active Australian Business Number (ABN)
- be registered for the Goods and Services Tax (GST), if required by the Australian Tax Office
- not have any outstanding reports, acquittals or serious breaches relating to any Australian Government funding

*Unincorporated groups with an arts or cultural heritage purpose are eligible for funding but must be auspiced by an organisation that meets the above criteria.*

*Individual business units and entities of local government or state government authorities with an arts or cultural heritage purpose (such as art galleries, museums or performing arts centres) are eligible to apply.*

*The National Archives of Australia, as a non-corporate Commonwealth entity, are eligible to apply under the program and if successful, would receive a notional payment under a Memorandum of Understanding*

*For the purpose of this application "**The Applicant**" is the organisation undertaking the project. Details about the auspice body will be asked for later in the form, if relevant.*

#### **Applicant organisation name \***

Organisation Name

Must be the full legal name of the applicant organisation

#### **Is your organisation's principal purpose arts and/or cultural heritage? \***

Yes  No

Your answer has indicated that you are ineligible under the program

You have indicated that your organisation's principal purpose is **not** arts and/or cultural heritage.

This makes you ineligible under the Visions of Australia grant program.

# Visions Application

## Form Preview

For more information about eligibility, please refer to the Visions of Australia Program Guidelines on page 1.

### Applicant principal purpose

In this section please provide the details of the organisation undertaking the project.

**Please select which of these categories best describes your organisation's principal purpose: \***

- |   |  |   |                                      |
|---|--|---|--------------------------------------|
| <input type="checkbox"/> Community Arts | <input type="checkbox"/> Cultural Heritage | <input type="checkbox"/> Digital Arts     | <input type="checkbox"/> Visual arts |
| <input type="checkbox"/> Crafts         | <input type="checkbox"/> Design            | <input type="checkbox"/> Screen based art |                                      |

**Please select the classifications that apply to your organisation: \***

- |                                    |                                      |                                       |  |
|------------------------------------|--------------------------------------|---------------------------------------|--|
| <input type="checkbox"/> Community | <input type="checkbox"/> Gallery     | <input type="checkbox"/> Contemporary | <input type="checkbox"/> Aboriginal                  |
| <input type="checkbox"/> Regional  | <input type="checkbox"/> Museum      | <input type="checkbox"/> Educational  | <input type="checkbox"/> Torres Strait<br>Islander   |
| <input type="checkbox"/> State     | <input type="checkbox"/> Institution | <input type="checkbox"/> Touring      | <input type="checkbox"/> Disability                  |
| <input type="checkbox"/> National  | <input type="checkbox"/> Historical  | <input type="checkbox"/> Media        | <input type="checkbox"/> Other: <input type="text"/> |

Select all that apply.

**How many staff does your organisation employ? (Expressed as Full Time Equivalent): \***

For part-time staff, you can use decimal points. E.g. someone who works two days per week would be represented as 0.4.

**What is your organisation's annual turnover? (to the nearest \$10,000): \***

\$

**Is your organisation an Indigenous or Non-Indigenous organisation? \***

- Indigenous  
 Non-Indigenous

Indigenous organisation: Any organisation where 50 per cent or more of its Board Directors are Aboriginal or Torres Strait Islander people.

Please select one definition below that best describes how your Indigenous organisation is structured:

**Tier 1** - An incorporated Aboriginal or Torres Strait Islander organisation with at least 51% Indigenous ownership **and** at least 51% Indigenous control via its governing body that is either:

- Tier 1a - a Community-controlled\* organisation where the above thresholds are mandated by its governing rules or legislation;
- Tier 1b - not a Community-controlled\* organisation but meets the above 51% Indigenous ownership and 51% Indigenous control thresholds.

**Tier 2** - Another organisation, with at least 50% Indigenous ownership or 50% Indigenous control

# Visions Application

## Form Preview

### Select tier \*

- Tier 1a  Tier 1b  Tier 2

\*Community-controlled means an Indigenous organisation with majority Aboriginal and/or Torres Strait Islander ownership and control, and that is operated for the benefit of Aboriginal and Torres Strait Islander communities.

### Please provide a brief outline of your organisation or group's history: \*

Word count:

Must be no more than 80 words

### Briefly outline your organisation's major exhibition development and touring achievements over the past three years: \*

Word count:

Must be no more than 120 words

### Are you applying as: \*

- an incorporated organisation applying in your own right  
 an unincorporated group or individual applying through an auspicing body  
 an arts or cultural heritage business unit of a local or state government authority  
 a non-corporate Commonwealth government entity

## Applicant reporting compliance

### Do you have any outstanding reports, acquittals or breaches relating to any Australian Government funding? \*

- Yes  No

### If you answered yes, please briefly outline which program you have outstanding reports for and why: \*

Word count:

Must be no more than 100 words

## Auspice Body information

\* indicates a required field

### Auspicing Body principal purpose

# Visions Application

## Form Preview

In this section please put the details of the auspicing organisation you are applying through. An [Auspice Arrangement Confirmation form](#) must be attached in the Supporting Documentation section towards the end of this form.

### **Auspice organisation \***

Organisation Name

### **Please select which of these categories best describes your auspicing body's principal purpose: \***

- Community Arts     Cultural Heritage     Digital Arts     Visual arts  
 Crafts     Design     Screen based art

### **Select the classifications that apply to your auspicing organisation: \***

- Community     Gallery     Contemporary     Aboriginal  
 Regional     Museum     Educational     Torres Strait  
Islander  
 State     Institution     Touring     Disability  
 National     Historical     Media     Other:

## Auspice Body reporting compliance

### **Does your auspicing organisation have any outstanding reports, acquittals or serious breaches relating to any Australian Government funding? \***

- Yes     No

### **If you answered yes, please briefly outline which program you have outstanding reports for and why: \***

Word count:

Must be no more than 100 words

## Conflict of interest

### **Are there any potential perceived or actual conflicts of interest arising from the proposed activity with this auspicing body? \***

- Yes     No

### **Provide a statement addressing the potential perceived or actual conflicts of interest:**

Word count:

Must be no more than 150 words.

### Applicant details

\* indicates a required field

#### Organisation contact information

- Please note that if you are not incorporated and are applying through an auspice body the ABN question will not be available in this section.
- The details of the auspicng body you are applying through including the ABN should be provided in the next section.
- Please note that if you receive funding your contact details will be made available to the Minister for the Arts and other Members of Parliament.

**Head of organisation name \***

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

**Head of organisation position \***

**Head of organisation phone number \***

Must be an Australian phone number

**Head of organisation email**

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**Applicant primary contact name \***

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

**Position \***

**Phone number \***

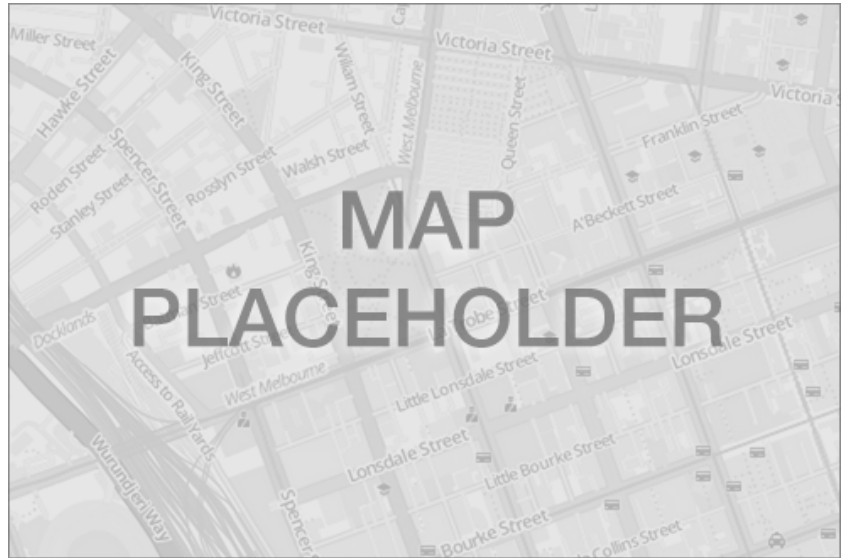
**Mobile phone number**

**Email \***

**Organisation primary address \***

Address

# Visions Application Form Preview



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

# When recording your location, you may be presented with multiple address options. Please choose the most complete address with a **postcode** when making your selection.

**Remoteness  
Classification of  
Application Organisation**

This value is generated using the lookup function based on the applicant address provided.

**Applicant postal address**  
\*

Address

Suburb    State    Postcode

**Applicant website**

**Applicant 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	<a href="#">More information</a>
ACNC Registration	
Tax Concessions	
Main business location	

**Is your organisation registered for GST? \***

Yes

No

**Auspice contact name \***

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

**Auspice contact position**

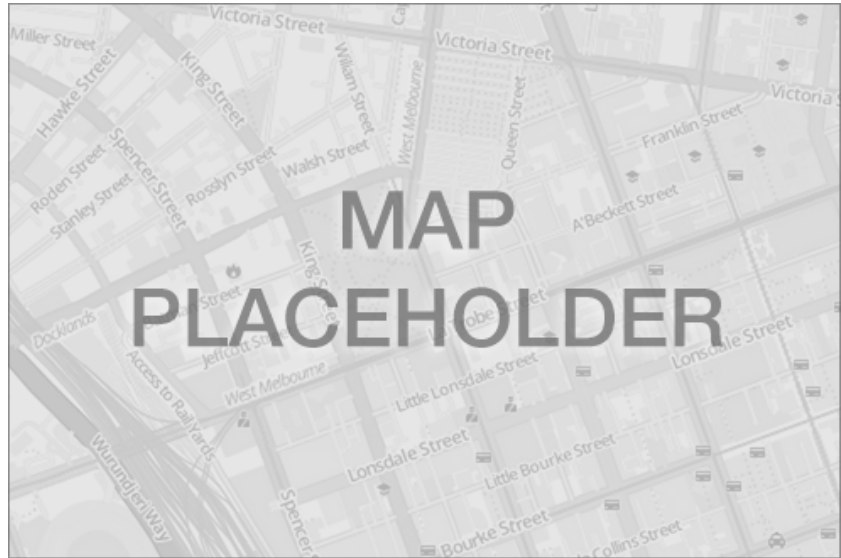
**Auspice address \***

Address

  
  
Suburb State Postcode



# Visions Application Form Preview



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

**Auspice phone number \***

**Auspice email \***

**Auspice website**

**Auspice postal address**

Address

Suburb   State   Postcode

**Auspice 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	<a href="#">More information</a>
ACNC Registration	
Tax Concessions	
Main business location	

## Project overview

\* indicates a required field

Visions of Australia funding is delivered through two streams:

- **Development:** for the costs of planning for the exhibition to tour. This may include research, design and staging/production costs.
- **Touring:** for the costs to produce the exhibition and the costs to transport, install and dismantle the exhibition.

**What stream are you applying for \***

**Project start date \***

**Note:** Projects must **not** start before 1 July if you are applying in the February funding round or 1 January if you are applying in the September funding round.

**Project end date \***

**Note:** This should be at least one week after works have been disbursed or returned home.

Visions of Australia supports touring of many types of exhibitions including but not limited to:

- cultural material of historic, scientific, design, social or artistic significance
- the work of contemporary visual or craft artists
- moving image and multimedia

**However,** commission of new artwork and contingency amounts are ineligible costs.

# Visions Application

## Form Preview

**Which of the following options best categorises your exhibition genre or artform?**

\*

Art Support or Development  Community Arts  Crafts  Cultural Heritage  Design  Digital Arts  Screen based art  Visual arts

select all that apply

**Please identify the primary artform for your project \***

---

**Project title \***

**Provide a brief project description: \***

Word count:

Must be no more than 100 words

**Have you previously received Visions development or touring funding for this project? \***

Yes

No

**Please provide the year the project was funded. \***

Must be a number

**Please provide the Visions application number that was funded.**

## Employment

**Will this project create any new employment opportunities for your organisation? \***

\*

Yes

No

Please provide employment statistics for your project. When selecting the employment status, please note:

- A short-term employee includes those whose employment includes entitlements.
- An independent contractor includes owners and managers of incorporated and unincorporated businesses, including sole-traders.

# Visions Application

## Form Preview

Example Job-type categories are:

- **Arts professionals** (curators, artists, designers)
- **Miscellaneous technicians and trades workers** (performing arts, gallery, museum technicians)

Job-type category	Employment status	Number of employees
		Must be a whole number (no decimal place).

## Project involvement

\* indicates a required field

### Key personnel and artist details

Please provide some information on the key personnel and artists in your project team:

Name	Role in the project	Confirmation	Brief description of experience
Select the Add More button to add extra rows.			Must be no more than 100 words

### Project team

The involvement of people in your project team from culturally and linguistically diverse backgrounds or with disability may be considered in the assessment of your application.

Please provide some statistical information on the diversity of the artists and personnel in your project team:

#### Artists

Number of artists that identify as Aboriginal and/or Torres Strait Islander \*

Must be a whole number (no decimal place).

Number of artists that identify as Culturally and Linguistically Diverse \*

Must be a whole number (no decimal place).

Number of artists that identify as persons with disability \*

Must be a whole number (no decimal place).

#### Personnel

Number of personnel that identify as Aboriginal and/or Torres Strait Islander \*

Must be a whole number (no decimal place).

Number of personnel that identify as Culturally and Linguistically Diverse. \*

Must be a whole number (no decimal place).

Number of personnel that identify as persons with disability \*

Must be a whole number (no decimal place).

# Visions Application

## Form Preview

### Artists

**Number of male artists \***

Must be a whole number (no decimal place).

**Number of female artists \***

Must be a whole number (no decimal place).

**Number of gender X artists \***

Must be a whole number (no decimal place).

### Personnel

**Number of male personnel \***

Must be a whole number (no decimal place).

**Number of female personnel \***

Must be a whole number (no decimal place).

**Number of gender X personnel \***

Must be a whole number (no decimal place).

### Project team size

This number/amount is calculated.

This number is calculated by adding female, male and gender X artists and personnel

## Support and partnerships

\* indicates a required field

***Visions of Australia encourages partnerships between organisations, particularly collaboration across the collections sector, to form curatorial partnerships and where appropriate, access to mentoring and skills transfer opportunities.***

Please tell us about the support you have for the project, including: community support, and financial and creative partnerships.

### Community support

**Please provide a brief overview of the community support you have generated for the project: \***

Word count:

Must be no more than 150 words

### Financial partnerships

**Do you have financial partners in the project? \***

Yes

No

# Visions Application

## Form Preview

Please provide information about your financial partnerships.

- Partnership funding does not have to be finalised at the time of application. Please indicate whether the funding is tentative, confirmed pending your project going ahead or confirmed and received.
- Please ensure that the figures here are also included in and consistent with your budget.
- Partnership funding can be either cash or in-kind.

Select the **Add More** button to add extra rows.

**Name of Project New or Existing Confirmation:**      **Cash / In-kind:**      **Contribution Amount (GST Exc):**  
**Partner:**                      **Partnership:**

				\$
Drag the corner with lines to expand the cell.				Must be a whole dollar amount (no cents).

**Total financial partnership contributions (GST Exc)**

\$

This number/amount is calculated.

**Briefly describe the nature of your financial partnerships:**

Creative partnerships

**Do you have creative partners in this project? \***

Yes

No

Please list the creative partnerships and collaborations which will contribute to your project.

You can add as many partners as you need by selecting the **Add More** button.

**Partner Name \***

**Is this a new creative partnership? \***

Yes

No

**What will be achieved through this partnership? \***

Must be no more than 100 words.

**What outcomes will be achieved through this partnership? \***

- Collaboration
- Mentoring
- Skills transfer
- Training
- Co-creation
- Curatorial
- Project management
- Other:

# Visions Application

## Form Preview

**Number of new creative partnerships \***

Must be a whole number (no decimal place).

**Number of existing creative partnerships \***

Must be a whole number (no decimal place).  
Must be a number

**Briefly describe the nature of your collaboration or co-creative approach: \***

Word count:

Must be no more than 100 words

### Partnership benefits

**Please describe the benefits of your partnerships (financial and/or creative) to this project, including: likely ongoing benefits and development opportunities that have or may be realised. \***

Word count:

Must be no more than 150 words

## Access

\* indicates a required field

***Visions of Australia aims to increase access for Australian audiences to exhibitions of quality Australian arts and cultural material, with a particular focus on regional and remote Australia.***

**Tell us about why your project will appeal to audiences: \***

Word count:

Must be no more than 200 words

### Access benefits

**Tell us about the benefits of your project to the artists involved in terms of their likely exposure to wider audiences and opportunity for wider artistic expression: \***

# Visions Application

## Form Preview

Word count:

Must be no more than 150 words

**Please describe the benefits and relevance of your project to the arts and cultural sector: those participating in the project, audiences, and the community: \***

Word count:

Must be no more than 200 words

## Accessibility

It is important to us that Australia's high-quality arts and cultural experiences are accessible to the whole community. One in every five Australians has a disability. Many more do not identify but still experience barriers to access. Parents with prams often experience the same access barriers as wheelchair users. Older people with sight or hearing loss often experience the same barriers as people who are deaf and/or blind/vision impaired.

For tips on how to increase the accessibility of your project or to assist you in thinking about this, visit [Arts Access Australia](#)

**Tell us about how you plan to ensure your project is accessible, including to people with disability.** Please complete the [Arts Access Australia Project Accessibility template](#) or provide a written response below.

**Which of these actions will you complete? \***

- (a) Upload a completed version of the Arts Access Australia Project Accessibility template
- (b) Type your response below.

**Arts Access Australia Project Accessibility Plan \***

Attach a file:

If providing an AAA plan it can be attached here. Please name and submit your file with the title 'AAA Plan'.

**Accessibility plan \***

Word count:

Must be no more than 150 words

**Is the project disability led? \***

- Yes
- No



# Visions Application

## Form Preview

A disability-led project is defined as one in which people with disability themselves are leading the creative development process.

### Please give details on how the project is disability led \*

A disability-led project is defined as one in which people with disability themselves are leading the creative development process.

## Growing audiences

\* indicates a required field

### Projected audience statistics

Gathering statistics about who will access, participate in or benefit from your project, helps us to measure the success of your project and the value of funding for the arts.

We will measure these things again in your final report.

### Development project itinerary

Please provide details about the Presenters you anticipate being involved in the project.

When selecting the presenter type please choose from the below types:

- **Partner Presenters** are contributors that will host the exhibition. Contributions might include loans, curatorial expertise, staff or financial support (not including a standard exhibition fee).
- **Interested Presenters** are those who have expressed interest in potentially being part of a future tour.
- **Potential Presenters** are those you are considering approaching once the exhibition development is underway or completed.

You **must** attach [venue confirmation forms](#) in the Supporting Documentation section towards the end of this form.

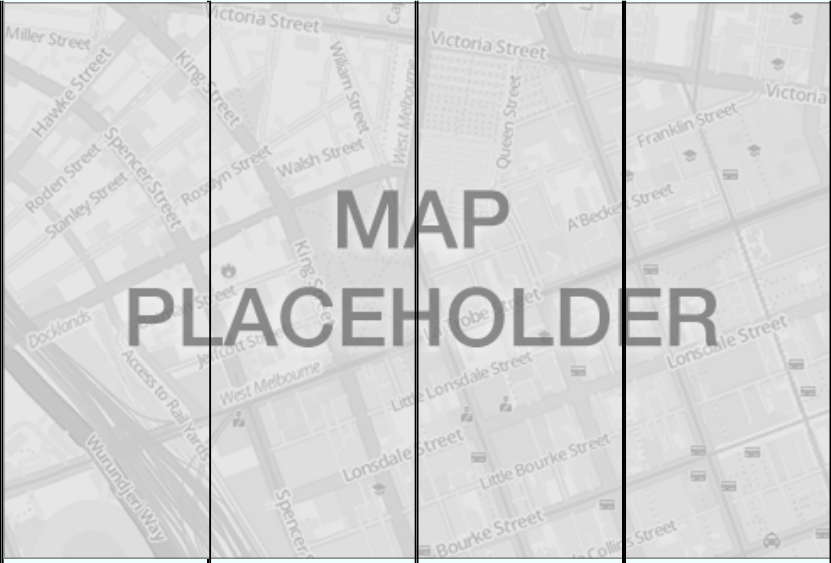
Your application will not be eligible if it includes only major city venues. In completing the details about your presenters you will be prompted to put in your anticipated itinerary and this will indicate the location category your venues are in

To list multiple venues, select the **Add More** button. Please list each venue in chronological order.

Venue Name	Address	Development Remoteness	Presenter Type	Possible Opening Date	Possible Closing Date

# Visions Application

## Form Preview

					
Drag the corner with lines to expand the cell.	Drag the corner with lines to expand the cell.	This is calculated from the address provided.		Must be a date.	Must be a date.

**This project has at least three venues outside of our State / Territory and includes at least one regional and / or remote venue. \***

- Yes
  No

**As you have selected no above, your application does not meet development eligibility criteria.**

### Touring project itinerary

Please list the locations where your project will take place. For multiple locations please enter in chronological order.

- **Attendance** means numbers of people who will visit the exhibition.
- **Participation** means numbers of people that will actively participate in the project (other than the project artists and personnel) for example workshop participants, school visits or participants of a fellowship program.

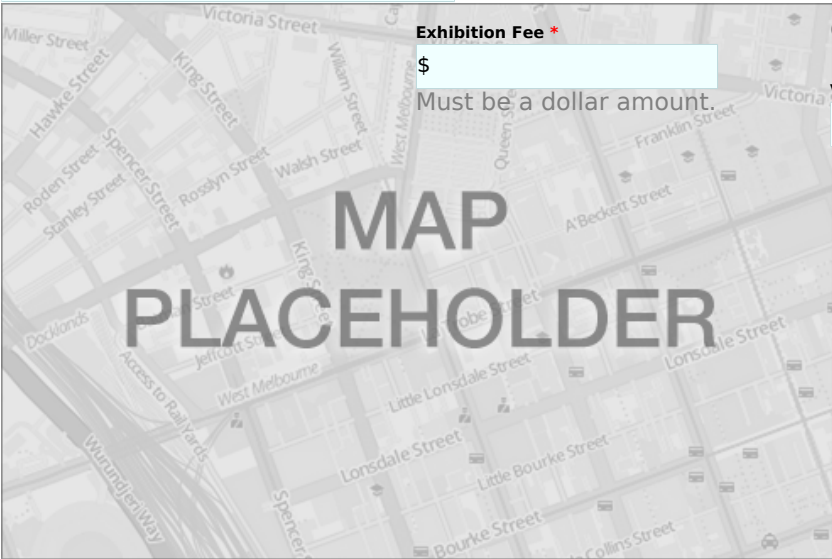
Please put zero in any fields that are not relevant and a short comment in the **Reason for Not Including Statistics** box below the table.

- You **must** attach [venue confirmation forms](#) in the Supporting Documentation section towards the end of this form.
- Your tour itinerary **must** include a minimum of three venues outside your state/ Territory to be eligible and include regional and/or remote venues.
- Your itinerary cannot include only major city venues or your application will be ineligible.
- In completing your application you will be prompted to put in your project itinerary and this will indicate the location category your venues are in.

# Visions Application

## Form Preview

To list multiple venues, select the **Add More** button. Please list each venue in chronological order.

<b>Venue Name *</b> <input type="text"/>	<b>Opening Date *</b> <input type="text"/> Must be a date.	<b>Projected Attendance *</b> <input type="text"/> Must be a whole number (no decimal place).
<b>Address *</b> Address <input type="text"/> <input type="text"/>	<b>Closing Date *</b> <input type="text"/> Must be a date.	<b>Projected Participation *</b> <input type="text"/> Must be a whole number (no decimal place).
 A satellite map of a city grid with the text 'MAP PLACEHOLDER' overlaid in large, bold, grey letters. The map shows streets like King Street, Walsh Street, and Lonsdale Street.		<b>Exhibition Fee *</b> \$ <input type="text"/> Must be a dollar amount.
		<b>Venue Status *</b> <input type="text"/>

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

**Touring Remoteness**  
  
This is calculated from the address provided.

**Total projected attendance**  
  
This number/amount is automatically calculated.

**Total projected participation**  
  
This number/amount is automatically calculated.

**Have you provided both attendance and participation statistics? \***  
 Yes  No

**Reason for not providing statistics \***

# Visions Application

## Form Preview

Must be no more than 50 words.

**This project has at least three venues outside of our State / Territory and includes at least one regional and / or remote venue. \***

Yes  No

**As you have selected no above, your application does not meet touring eligibility criteria.**

## Demographic

In relation to likely audiences, visitations, or attendances, tell us about the likely demographic for your project by selecting the categories that apply below:

**In relation to likely audiences, visitations, attendances, or participants, does your project target a specific audience? \***

Yes  No

## Target Audience:

### Age Group

- |  |  |
|--|--|
| <input type="checkbox"/> 0 - 11 years  | <input type="checkbox"/> 41 - 60 years |
| <input type="checkbox"/> 12 - 15 years | <input type="checkbox"/> 61 - 80 years |
| <input type="checkbox"/> 16 - 26 years | <input type="checkbox"/> Over 81 years |
| <input type="checkbox"/> 27 - 40 years |  |

### Gender

Male  Female  Non-Specific

**Provide a brief description of the target audience for your project:**

Word count:

## Funding request

\* indicates a required field

## Multi-year funding

Funding will be available through annual or multi-year grant agreements subject to available funds. If your project occurs over more than one year. You may opt to receive all funding in the first year, or you may apply for multi-year funding.

# Visions Application

## Form Preview

**Are you applying for multi-year funding? \***

**How many financial years of funding are you seeking? \***

**You can apply for a maximum of four financial years funding**

- To be considered for multi-year funding you must provide a strongly argued case, demonstrating the need for and benefits of multi-year support.
- If your project is touring over multiple years you do not need to apply for multi-year funding. You may receive all funding in one year.

**Case for multi-year support: \***

Word count:

Must be no more than 300 words

## Budget year 1

\* indicates a required field

**All budget items in Visions application forms should be GST EXCLUSIVE.**

There is no limit to the amount of funding that may be sought, however, applicants should keep in mind that the program seeks to support projects that deliver national outcomes and deliver a diverse range of quality projects in each of the program streams. To remain competitive, all applications for funding must be reasonable, include realistic budgets and represent value for money. The final amount of any funding and length of funding term awarded will be determined by the Minister, or delegate, after assessment by the department and subject to the Visions of Australia budgetary limits.

**Have you applied or been awarded funding under the RISE program from the Department for this project? \***

Yes  No

**Please provide details of RISE funding applied for, or awarded and how it is different to funding applied for under Visions \***

**Have you or will you apply for a funding grant from another source for this project? \***

Yes  No

# Visions Application

## Form Preview

**Please provide details on the other funding source \***

**Please select the financial year for year one of your project budget: \***

Note: If required, select the **Add More** button to add extra rows onto the tables below.

### Income Year 1: Visions Grant

**Amount requested year 1 (GST exc) \***

\$

Must be a whole dollar amount (no cents).

### Other Income - Year 1 (not including Visions funding)

Please outline the planned income for the exhibition excluding the proposed Visions grant. Include your own funds, funds being contributed by a financial partners, in-kind support, and funds from other grant programs.

*Note: For touring projects, please include projected exhibition fees as stated in your touring itinerary.*

Source	Grant program (if applicable)	Confirmation	Cash or In-kind	Amount (GST exc)
				\$ <input type="text"/>
				Must be a whole dollar amount (no cents).

**Other Income - Year 1: Total (GST exc)**

\$

This number/amount is calculated.

### Expenditure - Year 1 (Visions Grant)

The budget below should outline the items the grant funding will be spent on. If you application is successful, the *Expenditure of Grant Funds* budget will for part of the grant agreement.

**Please note, all budget items in Visions application forms should be GST EXCLUSIVE.**

- Quotes must be provided for any budget item above \$10, 000

# Visions Application

## Form Preview

- Any personnel/wage request require evidence to support the expected cost. This could include quotes, working budget notes, travel estimates based on research etc. For any wage/fee component for non-ongoing staff, please provide the **APS level/NAVA rates** and the period of employment noting costs should relate only to the period of employment for the project and for the time spent on the project.
- If successful you cannot change how you spend your grant money without formal approval from Visions

**Expenditure item examples:** Freight cost for VIC to NSW; Senior Curator fee as per NAVA rate 'Short Term Hourly Contract Rate'; One off appearance NAVA rate

For a breakdown of expenditure categories, click [here](#).

List below only those items that will be paid for with the Visions grant:

Expenditure Item	Expenditure Category	Amount (GST exc)
		\$
		Must be a whole dollar amount (no cents).

**Expenditure Year 1: Visions Grant Total (GST exc)**

\$

This is calculated and must equal the Year 1 Visions Grant amount requested.

**Request and Expenditure balance (GST exc)**

\$

This number/amount is calculated.

The above Request and Expenditure balance calculates the **Amount Requested Year 1** minus your **Expenditure Year 1: Visions Grant Total**. Balancing these two items will result in the calculated field being ZERO. You will not be able to submit your application if these two items do not balance.

### Expenditure of Other Income - Year 1 (not including Visions funding)

For a breakdown of expenditure categories, click [here](#).

List below any expenditure that will be paid for with funds other than the Visions grant:

Other Expenditure Item	Other Expenditure Category	Amount (GST exc)
		\$
		Must be a whole dollar amount (no cents).

**Expenditure Year 1: Other Total (GST exc)**

\$

This number/amount is calculated.

### Year 1 Balance (GST exc)

\$

This section calculates your income minus your expenditure to ensure your budget balances. If your budget balances the result in the calculated field will be ZERO. You will not be able to submit your application if your budget does not balance.

## Budget year 2

\* indicates a required field

**All budget items in Visions application forms should be GST EXCLUSIVE.**

**Please select the financial year for Year Two of your project budget: \***

Note: If required, select the **Add More** button to add extra rows onto the tables below.

### Income Year 2: Visions Grant

#### Amount requested year 2 (GST exc) \*

\$

Must be a whole dollar amount (no cents).

### Other Income - Year 2 (not including Visions funding)

Please outline the planned income for the exhibition excluding the proposed Visions grant. Include your own funds, funds being contributed by a financial partners, in-kind support, and funds from other grant programs.

*Note: For touring projects, please include projected exhibition fees as stated in your touring itinerary.*

Source	Grant program (if applicable)	Confirmation	Cash or In-kind	Amount (GST exc)
				\$
				Must be a whole dollar amount (no cents).

#### Other Income - Year 2: Total (GST exc)

\$



This number/amount is calculated.

### Expenditure Year 2 (Visions Grant)

The budget below should outline the items the grant funding will be spent on. If your application is successful, the *Expenditure of Grant Funds* budget will for part of the grant agreement.

**Please note, all budget items in Visions application forms should be GST EXCLUSIVE.**

- Quotes must be provided for any budget item above \$10, 000
- Any personnel/wage request require evidence to support the expected cost. This could include quotes, working budget notes, travel estimates based on research etc. For any wage/fee component for non-ongoing staff, please provide the **APS level/NAVA rates** and the period of employment noting costs should relate only to the period of employment for the project and for the time spent on the project.
- If successful you cannot change how you spend your grant money without formal approval from Visions

**Expenditure item examples:** Freight cost for VIC to NSW; Senior Curator fee as per NAVA rate 'Short Term Hourly Contract Rate'; One off appearance NAVA rate

For a breakdown of expenditure categories, click [here](#).

List below only those items that will be paid for with the Visions grant:

Expenditure Item	Expenditure Category	Amount (GST exc)
		\$
		Must be a whole dollar amount (no cents).

**Expenditure Year 2: Visions Grant Total (GST exc)**

\$

This number/amount is calculated.

This must equal the Year 2 Visions Grant amount requested.

**Request and Expenditure balance (GST exc)**

\$

This number/amount is calculated.

The above Request and Expenditure balance calculates the **Amount Requested Year 2** minus your **Expenditure Year 2: Visions Grant Total**. Balancing these two items will result in the calculated field being ZERO. You will not be able to submit your application if these two items do not balance.

### Expenditure of Other Income - Year 2 (not including Visions funding)

# Visions Application

## Form Preview

For a breakdown of expenditure categories, click [here](#).

List below any expenditure that will be paid for with funds other than the Visions grant:

Other Expenditure Item	Other Expenditure Category	Amount (GST exc)
		\$
		Must be a whole dollar amount (no cents).

Expenditure Year 2: Other Total (GST exc)

\$

This number/amount is calculated.

---

Year 2 Balance (GST exc)

\$

This section calculates your income minus your expenditure to ensure your budget balances. If your budget balances the result in the calculated field will be ZERO. You will not be able to submit your application if your budget does not balance.

## Budget year 3

\* indicates a required field

**All budget items in Visions application forms should be GST EXCLUSIVE.**

**Please select the financial year for Year Three of your project budget: \***

Note: If required, select the **Add More** button to add extra rows onto the tables below.

## Income Year 3: Visions Grant

**Amount requested year 3 (GST exc) \***

\$

Must be a whole dollar amount (no cents).

## Other Income - Year 3 (not including Visions funding)

Please outline the planned income for the exhibition excluding the proposed Visions grant. Include your own funds, funds being contributed by a financial partners, in-kind support, and funds from other grant programs.

# Visions Application

## Form Preview

Note: For touring projects, please include projected exhibition fees as stated in your touring itinerary.

Source	Grant program (if applicable)	Confirmation	Cash or In-kind	Amount (GST exc)
				\$
				Must be a whole dollar amount (no cents).

Other Income - Year 3: Total (GST exc)

\$

This number/amount is calculated.

### Expenditure Year 3 (Visions Grant)

The budget below should outline the items the grant funding will be spent on. If your application is successful, the *Expenditure of Grant Funds* budget will for part of the grant agreement.

**Please note, all budget items in Visions application forms should be GST EXCLUSIVE.**

- Quotes must be provided for any budget item above \$10, 000
- Any personnel/wage request require evidence to support the expected cost. This could include quotes, working budget notes, travel estimates based on research etc. For any wage/fee component for non-ongoing staff, please provide the **APS level/NAVA rates** and the period of employment noting costs should relate only to the period of employment for the project and for the time spent on the project.
- If successful you cannot change how you spend your grant money without formal approval from Visions

**Expenditure item examples:** Freight cost for VIC to NSW; Senior Curator fee as per NAVA rate 'Short Term Hourly Contract Rate'; One off appearance NAVA rate

For a breakdown of expenditure categories, click [here](#).

List below only those items that will be paid for with the Visions grant:

Expenditure Item	Expenditure Category	Amount (GST exc)
		\$
		Must be a whole dollar amount (no cents).

Expenditure Year 3: Visions Grant Total (GST exc)

\$

This number/amount is calculated.

This must equal the Year 3 Visions Grant amount requested.

Request and Expenditure balance (GST exc)

\$

This number/amount is calculated.

The above Request and Expenditure balance calculates the **Amount Requested Year 3** minus your **Expenditure Year 3: Visions Grant Total**. Balancing these two items will result in the calculated field being ZERO. You will not be able to submit your application if these two items do not balance.

### Expenditure of Other Income - Year 3 (not including Visions funding)

For a breakdown of expenditure categories, click [here](#).

List below any expenditure that will be paid for with funds other than the Visions grant:

Other Expenditure Item	Other Expenditure Category	Amount (GST exc)
		\$
		Must be a whole dollar amount (no cents).

**Expenditure Year 3: Other Total (GST exc)**

\$

This number/amount is calculated.

**Year 3 Balance (GST exc)**

\$

This section calculates your income minus your expenditure to ensure your budget balances. If your budget balances the result in the calculated field will be ZERO. You will not be able to submit your application if your budget does not balance.

### Budget year 4

\* indicates a required field

**All budget items in Visions application forms should be GST EXCLUSIVE.**

**Please select the financial year for Year Four of your project budget: \***

Note: If required, select the **Add More** button to add extra rows onto the tables below.

# Visions Application

## Form Preview

### Income Year 4: Visions Grant

**Amount requested year 4 (GST exc) \***

\$

Must be a whole dollar amount (no cents).

### Other Income - Year 4 (not including Visions funding)

Please outline the planned income for the exhibition excluding the proposed Visions grant. Include your own funds, funds being contributed by a financial partners, in-kind support, and funds from other grant programs.

*Note: For touring projects, please include projected exhibition fees as stated in your touring itinerary.*

Source	Grant program (if applicable)	Confirmation	Cash or In-kind	Amount (GST exc)
				\$ <input type="text"/>
				Must be a whole dollar amount (no cents).

**Other Income - Year 4: Total (GST exc)**

\$

This number/amount is calculated.

### Expenditure Year 4 (Visions Grant)

The budget below should outline the items the grant funding will be spent on. If you application is successful, the *Expenditure of Grant Funds* budget will for part of the grant agreement.

**Please note, all budget items in Visions application forms should be GST EXCLUSIVE.**

- Quotes must be provided for any budget item above \$10, 000
- Any personnel/wage request require evidence to support the expected cost. This could include quotes, working budget notes, travel estimates based on research etc. For any wage/fee component for non-ongoing staff, please provide the **APS level/NAVA rates** and the period of employment noting costs should relate only to the period of employment for the project and for the time spent on the project.
- If successful you cannot change how you spend your grant money without formal approval from Visions

**Expenditure item examples:** Freight cost for VIC to NSW; Senior Curator fee as per NAVA rate 'Short Term Hourly Contract Rate'; One off appearance NAVA rate

For a breakdown of expenditure categories, click [here](#).

List below only those items that will be paid for with the Visions grant:

# Visions Application

## Form Preview

Expenditure Item	Expenditure Category	Amount (GST exc)
		\$
		Must be a whole dollar amount (no cents).

**Expenditure Year 4: Visions Grant Total (GST exc)**

\$

This number/amount is calculated.  
This must equal the Year 4 Visions Grant amount requested.

**Request and Expenditure balance (GST exc)**

\$

This number/amount is calculated.

The above Request and Expenditure balance calculates the **Amount Requested Year 4** minus your **Expenditure Year 4: Visions Grant Total**. Balancing these two items will result in the calculated field being ZERO. You will not be able to submit your application if these two items do not balance.

### Expenditure of Other Income - Year 4 (not including Visions funding)

For a breakdown of expenditure categories, click [here](#).

List below any expenditure that will be paid for with funds other than the Visions grant:

Other Expenditure Item	Other Expenditure Category	Amount (GST exc)
		\$
		Must be a whole dollar amount (no cents).

**Expenditure Year 4: Other Total (GST exc)**

\$

This number/amount is calculated.

---

**Year 4 Balance (GST exc)**

\$

This section calculates your income minus your expenditure to ensure your budget balances. If your budget balances the result in the calculated field will be ZERO. You will not be able to submit your application if your budget does not balance.

# Visions Application

## Form Preview

### Summary

\* indicates a required field

#### Budget summary

##### **Total amount requested (GST exclusive) \***

\$

This amount is calculated automatically from the Visions grant request per year.

##### **GST amount**

\$

This number/amount is calculated.

##### **Total project cost (GST exclusive) \***

\$

This amount is calculated automatically from the total project income, including the Visions grant.

##### **Percentage of requested grant funding**

This percentage is calculated automatically.

### Supporting documentation

\* indicates a required field

You can provide additional supporting information by uploading documents to this application or providing links to web based material. Please remember that images of the proposed exhibition material are key to assessing your application.

Assessors will consider up to 10 pages of additional information so include only information directly relevant to your application.

- URL links are the preferred method for submitting images or videos. You may provide links under **Links to Other Support Material**.

#### Uploads

##### **Quotes for all expenditure over \$10,000**

Attach a file:

All quotes must be submitted as a single document. Please name and submit your file with the title 'Expenditure Quotes'.

# Visions Application

## Form Preview

### Venue Forms - Touring Applications \*

Attach a file:

Venue Forms must be submitted as a single document. Please name and submit your file with the title 'Venue EOI/Confirmation Forms'. Electronic signatures are accepted.

### Venue Forms - Development Applications

Attach a file:

Venue Forms must be submitted as a single document. Please name and submit your file with the title 'Venue EOI/Confirmation Forms'. Electronic signatures are accepted.

The [Venue Form template is available here.](#)

### Sample Exhibition Content

Attach a file:

Please name and submit your file with the title 'Sample Exhibition Content'. Links to content can also be provided below.

### Press clippings relating to the proposed cultural material

Attach a file:

Press Clippings can also be provided by URL links below. If uploaded, there is a maximum three pages as one document. Please name and submit your file with the title 'Press Clippings'

### If you are being auspiced, please attach your confirmation form here.

Name and submit your form with the title 'Auspice Confirmation Form'.

\*

Attach a file:

### Links to other supporting material

You may wish to provide links to other supporting documentation. Examples of supporting documentation include, website, media coverage, an education kit, a video or images. Either provide links or social media handles.

Select the **Add More** button to add extra rows.

**Link or social media handle**

**Brief description**

Link or social media handle	Brief description
<input type="text"/>	<input type="text"/>



# Visions Application

## Form Preview

### Certification

\* indicates a required field

#### Application checklist

The applicant should review the application to make sure it aligns with the eligibility and assessment criteria in the Visions of Australia Program Guidelines, including that you have:

\*

- included at least one regional and remote venue in the project itinerary
- provided details of the co-contributions (both financial and in-kind) for the project
- attached quotes for all budget items above \$10,000
- provided sample exhibition content (press clippings and/or web links may be provided)
- attached all venue confirmation forms for each venue (expression of interest for development applications and confirmation for touring applications)
- the itinerary includes at least three venues outside of our State / Territory

All choices must be selected.

### Certification

#### **I the Applicant am authorised by my group/organisation to complete this application and certify that: \***

- I acknowledge that the Department of Infrastructure, Transport, Regional Development, Communications and the Arts may refer this application to independent assessors or other government departments for assessment, reporting, advice or comment.
- I acknowledge that contact details provided in this application may be disclosed to the Minister and other Members of Parliament.
- To the best of my knowledge the statements made in this application are true.
- If my application is approved, I will be required to accept the terms of the grant agreement.
- If successful, I will only spend the grant funds in accordance with the approved budget.
- If successful, I will undertake the project as described in this application.
- I acknowledge that I cannot change the approved project or budget without prior approval and I will notify the Department of Infrastructure, Transport, Regional Development, Communications and the Arts as early as possible to seek approval for a variation if required.
- If successful, we have the ability to comply with the Privacy Act 1988 (including the Australian Privacy Principles) and will impose the same privacy obligations on any subcontracters engaged to assist with this project.
- I acknowledge that I must ask for the Australian Government's consent in writing before disclosing confidential information.
- If successful, I will provide reports to the Department of Infrastructure, Transport, Regional Development, Communications and the Arts in accordance with the requirements of the grant agreement.
- All budget items are GST exclusive.

All of the criteria above must be selected/confirmed for you to be able to submit this form.

#### **Date of certification \***

Must be a date

