Artist Application form

* indicates a required field

Introduction

Overview

Welcome to the application form for Inner West Council's **Perfect Match Street Art program**. Grant funding of \$5000 - \$20,000 is available to support the production of contemporary street artworks in public places that tackle unwanted graffiti and benefit the Inner West community.

Grant Guidelines

Before completing this application, please refer to the <u>Artist Guidelines</u> to understand how the program runs and your expected deliverables. Applicants may only submit one application each round.Note: Incomplete applications and/or applications received after the closing date will not be considered.

For more information

All applicants are welcome to speak with Creative Programs Producer, **Belinda Walter** on **02 9392 5784** or email belinda.walter@innerwest.nsw.gov.au to clarify any questions you may have **prior to applying**. Applications cannot be modified once submitted.

Instructions

- Please provide a response to all relevant questions
- When you have completed all the questions click on **Next Page** to view the next page of the form
- Click **Save Progress** regularly to make sure your changes are saved
- You can jump pages by clicking on the **Application Form Navigation** area on the right-hand side of the form
- Once you have completed all pages the last page will ask you to **Review** your application.
- If you are happy with your responses, click **Submit**.

If your submission was received, you will be sent a **confirmation message** saying that your application has been submitted.

Please check your junk mail and ensure you safelist this address.

Conflict of Interest

All artist applicants must declare if they have, or could be perceived to have, a conflict of interest.

If the artist applicant works for Inner West Council or is affiliated with Council or if members of the public could have grounds to perceive that the artist applicant could personally have had influence in this application decision, you must declare this now.

Conflict of Interest *

□ I DO NOT have a conflict of interest

\square I DO have a conflict of interes	t			
If you DO have a conflict of interest, what would it be? Depending on the nature of the conflict of interest, you may still apply and be considered for the program.				
Eligibility				
Have you previously participal select all years that apply. *				
\square No - I have not participated \square in Perfect Match \square 2024 \square	2022	□ Perfect Match - prior to 1January 2020□ Other:		
☐ 2023 ☐ Select all years. If you have painted 3 murals) since 1 January 2020, you ar				
I am an Australian citizen, Per O Yes O No You are not eligible to apply if you do asked for proof of residency.				
Applicant Details				
Name *	Organisation Name	rganisation		
	Title First Name	Last Name		
What are your pronouns? *	□ She / her□ He / him□ They / them□ Other:			
	☐ Prefer not to say			
Residential Address *	Address Address Line 1, Suburb/Town, Country are required. Country	State/Province, Postcode, and must be Australia		
Email *	Must be an email address.			

	This should be the email address Smartygrants. It will be used as correspondence related to your	the contact method for all		
Re-type your Email *	Please ensure you have not ma	de any errors.		
Phone Number *	Must be an Australian phone nu	umber.		
Do you identify as: *	 □ Aboriginal □ Torres Strait Islander □ Person living with a disability □ CALD - Culturally and linguistically diverse Please select all that apply 	□ Person of colour□ LGBTQ+□ Other:□ None of the above		
How would you define your stage of practice? *	☐ Early-Career Artist ☐ Mid-Career Artist ☐ Established Artist No more than 1 choice may be selected. Please see a definition of each category in the Perfect Match - Artist Guidelines			
Applicant Details - Access				
Access requirements				
Please outline any specific access requirements and the associated cost. Council is committed to ensuring artists with disability can participate in this program. Application not eligible				
Given your answer to the above of 25-26.	questions, you are not eligible	e to apply to Perfect Match		
If you have any concerns, please	reach out to belinda.walter	r@innerwest.nsw.gov.au.		
Thank you for your interest in the	e program.			

Selection Criteria

* indicates a required field

Selection Criteria 1 - Excellence in arts and creative practice (weighting 50%)

Please provide us with a copy of your CV * Attach a file:		
Please provide us with .jpeg samples of your work (no PDFs) that best demonstrate your artistic practice and distinctive style (maximum 12) * Attach a file:		
A maximum of 12 files may be attached.		
Recommended file size is no more than 5MB. Maximum file size allowed is 25MB.		
Selection Criteria 2 - Connection to the Inner West (weighting 25%)		
Do you live, or have your studio, in the Inner West local government area? * O Yes		
No Check your address is in the local government area via this link: https://www.olg.nsw.gov.au/public/find-my-council/		
What is your connection to the Inner West? Please tell us why you would like to particpate in this program? (200 words max) \ast		
Must be no more than 200 words. List any connection you have, for example: were you born, did/does your family live or own a business, did you go to school or do you work in the Inner West?		
Selection Criteria 3 - Experience delivering commissioned work (weighting 25%)		
Please describe your relevant skills and experience collaborating with stakeholders to deliver work to a brief		
on time and budget. Include any projects that have required community engagement through the design process. (200 words max) *		

Additional information

* indicates a required field

Attachments

Please provide your Instagram	This is not essential - but please list if you have an artist profile	
Please provide your website	Must be a URL. This is not essential - but please list if you have one	
Do you have public liability insurance? *	○ Yes○ No	
Does your public liability insurance cover working at heights above 3 metres?	YesNo	
If yes, please provide us with a copy of your public liability insurance	Attach a file:	
Do you hold any of these licences? *	 □ Yellow Card □ Work Safely at Heights □ High Risk Work □ Working Safely near live electrical apparatus as a Non-electrical Worker □ Other: □ No licences Select any that apply. 	
If yes, please provide	Attach a file:	
us with a copy of your licences		
If no, and you are successful, are you willing to obtain a Yellow Card (or other certification)?	☐ Yes☐ No Council will fund the cost of any licences required specific to your site. Yellow Card training program provides operators with the knowledge and skills to safely operate Mobile Elevating Work Platforms (scissor-lifts and boom-lifts).	
Additional Information		
Do you have a specific property / wall in mind for this project? O Yes O No This will not impact the score of your application.		
If yes, please provide us with the address of the property.		

The property owner will also need to submit a Perfect Match - Property Application Form to be considered.

Are you willing to work with a ○ Yes ○ No Should your nominated property not		
What wall surfaces are you co ☐ Bare brick ☐ Painted brick ☐ Aluminium or colourbond	omfortable painting on? * Corrugated iron Weatherboard Other:	
☐ Concrete (block or render) Choose all that apply. This information will be considered in the matching process.		
Declaration		
I have read the Artist Guidelines and choose to apply to the program on these terms *	O Yes If you have any concerns, please speak to Council staff before submitting your application.	
I declare that the information on this form is true and accurate to the best of my knowledge *	○ Yes	