



ELIGIBILITY

I have read through the application information on the Queer Screen webpage and our project is eligible to apply

APPLICANT'S DETAILS					
AUSTRALIAN BUSINESS NUMBER					
ORGANISATION NAME		PROJECT NAME			
POSTAL ADDRESS					
SUBURB	РО	STCODE			
CONTACT (PERSON SUBMITTING	G THE APP	PLICATION)			
FIRST NAME					
LAST NAME					
POSITION					
PHONE AND/OR MOBILE					
EMAIL					
CREATIVE TEAM					
NAME	ROLE				
GENDER		ALIAN CITIZEN/RESIDENT			
STATE OF RESIDENCE MC					
EMAIL					
RELEVANT CREDITS					
RELEVANT CREDITS PROJECT TITLE CREDITED	ROLE	TYPE (e.g. one-off, doco)	YEAR		
RELEVANT CREDITS PROJECT TITLE CREDITED 1	ROLE	TYPE (e.g. one-off, doco)	YEAR		
RELEVANT CREDITS PROJECT TITLE CREDITED 1 2	ROLE	TYPE (e.g. one-off, doco)	YEAR		
PROJECT TITLE CREDITED 1 2 3	ROLE	TYPE (e.g. one-off, doco)	YEAR		
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CREATIVE TEAM	(CONTINUED)				
NAME		ROLE			
GENDER	ENDER		LIAN CIT	TIZEN/RESIDENT	
STATE OF RESIDENCE		MOBILE			
EMAIL					
RELEVANT CREDITS					
PROJECT TITLE	CREDITED RO	LE	TYPE (e	g. one-off, doco)	YEAR
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2					
3					
4					
	BIO (u	ıp to 1000 w	vords)		
LINK TO PREVIOUS WORK (if	f available)				
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CREATIVE TEAM	· · · · · · · · · · · · · · · · · · ·	ROL F			
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CREATIVE TEAM NAME GENDER STATE OF RESIDENCE EMAIL	· · · · · · · · · · · · · · · · · · ·	AUSTRA		FIZEN/RESIDENT	
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CREATIVE TEAM NAME GENDER STATE OF RESIDENCE EMAIL RELEVANT CREDITS PROJECT TITLE 1	(CONTINUED)	AUSTRAI MOBILE			YEAR
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CREATIVE TEAM	(CONTINUED)							
NAME		ROLE						
GENDER		AUSTRALIA	N CITIZEN/RESIDENT					
STATE OF RESIDENCE		MOBILE						
EMAIL								
RELEVANT CREDITS								
PROJECT TITLE	CREDITED RO	IF TY	PE (e.g. one-off, doco)	YEAR				
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	BIO (u	p to 1000 wor	ds)					
	D:0 (u	P 10 1000 WOI						
LINK TO PREVIOUS WORK (if	available)							
PROJECT DETAILS								
NAME OF YOUR PROJECT								
	BRIEF SUMMARY							
	(including s	tage of develo	ppment)					
LOG LINE								
(50 words max)								
	SHORT SYNOPSIS							
(200 words max)								

PROJECT DETAILS (CONTINUED)		
HOW DOES YOUR PROJECT EMBODY QUEER SCREEN'S MISSION STATEMENT "To transform and engage individuals and communities through queer storytelling on screen" (500 words max)		
	AUDIENCE rds max)	
LINK TO CURRENT EDIT OF WORK		
HOW MANY PEOPLE ARE INVOLVED IN THIS PROJECT (including crew, cast, post production)		
DURATION		
PROPOSED SHOOTING FORMAT AND CAMERA		
GENRE DIRECTOR'S	STATEMENT	
	ords max)	

PROJECT DETAILS (CONTINUED)		
PRODUCER'S STATEMENT including outline of marketing/distribution plan (1500 words max)		
MEASURING SUCCESS		
ARE THERE ANY ISSUES YOU FORESEE TO SU	JCCESSFULLY COMPLETING YOUR PROJECT? ese be managed?	
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FUNDING Have you previously received funding from Queer Screen or other grants for projects the same or similar to this proposed project?		
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FUNDING (CONTINUED)	
If you will receive funding from another source for this project please provide details.	
Please list any other information that you'd like the selection panel to consider.	
CLEARANCES	
Is the project based partly or wholly on a real life person or event? If yes provide details and attach relevant documents.	
Do you have appropriate releases and authorisation to make this project? (Yes/ No) (everything else will go in chain of title summary).	
Copyright© The Applicant must either hold the rights or have an appropriate This is includes for example, the copyright in a script or treatme such as a book, format, unpublished manuscript etc)	e option to acquire the rights necessary to produce the project. ent, and the right to make the project if it is based on another work
HOW DID YOU FIND ABOUT QUI Please tick the most appropriate box/es	EER SCREEN'S GRANT?
Webpage Social Media	E-newsletter Direct Correspondence
Film Maker Event Friend	Community Newspaper
Other (Please specify)	
CHECKLIST BEFORE SUBMISSION Please ensure you have attached the required documents of the second statement of the second state	N ents and completed the following;
Check you have completed all sections before you submit this application	Please list any other information that you'd like the selection panel to consider.
2. Full synopsis	selection panel to consider.
3. Copies of broadcaster license/ distribution agreements/ sales deal memos if available	
4. Summary budget (1 page)	
5. Summary production schedule (1 page)	
6. Finance plan	
7. Main cast bios	
8. Chain of title summary (who owns rights to material)	
I certify that, to the best of my knowledge, all inform	ation contained in this document is true and correct.
Name	Signature

All documents should be sent electronically (pdf documents only or link to dropbox with pdf documents) filmmakers@queerscreen.org.au