**LIMERICK CITY AND COUNTY COUNCIL CULTURE AND ARTS OFFICE**

**INTERNATIONAL MOBILITY AWARD 2017**

**APPLICATION FORM**

## Opens Monday 4th of September 2017

**REF: IMA2017**

**SECTION 1: CONTACT DETAILS – To be completed by all applicants**

**1.a Name of Organisation/Applicant:**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**1.b Name & Address of contact person for correspondence:**

**Phone:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  **E-mail:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**1.c Address of organisation/group:**

* **Tick here to opt-out of our email notification on future grants opportunities**

**1.d Website:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**1.e Social Networking Sites:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **(**Please note: URL links are for reference only. All applications must include separate supporting material e.g. CV, images, sound files etc.)

**SECTION 2: FUNDING - To be completed by all applicants**

**2.a International Mobility Award requested**

**€**

**2.b Total estimated cost of the International Mobility: €**\_\_\_\_\_\_\_\_\_\_

**2.c Has additional funding for this project been secured from any other sources? Yes**\_\_\_\_\_\_\_  **No**\_\_\_\_\_\_\_

**If yes, please give further details of this additional funding:**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**2.d Other funding received from Limerick City and County Council towards this project (**please includes grants received from other departments in Limerick City and County Council**):**

**€**

**€**

**2016 2015**

**PLEASE COMPLETE EITHER SECTION 3 OR SECTION 4 AS APPROPRIATE**

**SECTION 3: ABOUT THE APPLICANT - To be completed by ORGANISATIONS**

**3.a How long is the organisation established? \_\_\_\_\_\_\_\_\_\_**

## 3.b Legal Status: \_\_\_\_\_\_\_\_\_\_\_\_\_\_

**3.c Organisation’s arts activities or area of interest: (300 word limit)**

**3.d Organisation’s Mission Statement: (80 word limit)**

## 3.e Please give a brief history of the organisation/group: (100 word limit)

## 3.f Names of Chair and Committee Members: (if applicable)

## 3.g Does your organisation have a Constitution? Yes \_\_\_\_\_\_\_\_ No \_\_\_\_\_\_\_\_

**3.h If a membership based organisation, how many members do you currently have?** \_\_\_\_\_\_\_\_\_\_\_\_\_\_

**3.i What is your membership fee? Please outline if different rates apply to students, OAP’s, etc.**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**3.j Do you engage in co-operative or partnership programming with any other European or International groups?**

|  |  |  |  |
| --- | --- | --- | --- |
| **NAME** | **LOCATION** | **EXPERTISE** | **PROJECT** |
|  |  |  |  |
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**3.K Does your organisation work with children? Yes\_\_\_\_\_\_\_\_\_ No\_\_\_\_\_\_\_\_\_**

**Have you a policy on child protection? Yes\_\_\_\_\_\_\_\_\_ No\_\_\_\_\_\_\_\_\_**

**If yes, please attach a copy.**

**SECTION 4: ABOUT THE APPLICANT - To be completed by INDIVIDUAL APPLICANTS**

**4.a Tell us about yourself. Give us a brief introduction to yourself and outline of your recent artistic achievements. (300 word limit)**

## SECTION 5: PROPOSAL FOR FUNDING – To be completed by all applicant

## 5.a Indicate which artforms/arts practices are relevant to your application. Click a maximum of three boxes – your primary artform/arts practice and up to two others. Each item you select should represent a significant element of the activities described in your application

\* Including contexts of health, disability, cultural diversity, older people and/or communities of

place or interest.

|  |  |  |
| --- | --- | --- |
| □ Architecture | □ Arts Participation\* | □ Circus |
| □ Dance | □ Literature | □ Music |
| □ Opera | □ Spectacle | □ Street Arts |
| □ Theatre | □ Traditional Arts | □ Visual Arts |
| Young People, Children and Education (YPCE) |  |  |

**5.b Outline briefly the proposal for which an award is being sought:**

Please summarise in no more than **three short points** what you want to do and why (50 words max.)

**5.c Details of your proposal:**

Please describe your proposal in more detail (500 words max).

What you write here is a key part of your proposal, and should help those involved in assessing your application to understand the full scope of what you want to do and why. It might include entries such as a practical explanation of the activity you propose, your artistic goals and ambitions, the wider context in which you are making the proposal, and any other information you consider relevant. Do not assume that assessors will be familiar with your work.

**5.d Proposed location of International Mobility project** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**5.e Proposed date(s):** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**5.f Benefits to Limerick (110 words max):**

**5.h Other artists, individuals, groups or organisations involved in your proposal**

Please list any other artists, individuals, groups or organisations involved in your proposal. Where appropriate, you should also submit details of the expertise of such people, and upload it with your application.

If your application/proposal does not involve anyone else, leave this section blank.

**SECTION 6: Your application and the Assessment Criteria.**

**6.a Please describe how your proposal/application meets the objectives and assessment criteria for the International Mobility Award (max 150 words).**

**SECTION 7: FINANCE – To be completed by all applicants**

**7.a Expenditure: Please give a breakdown of all projected expenditure relating to your proposal under headings such as travel, accommodation, subsistence, course fees etc.**

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| --- | --- |
| **Expenditure - Details** | **Amount** |
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|  |  |
|  |  |
|  |  |
|  |  |
| **Projected Total** | **€** |

**7.b Income: Please indicate any income you expect to receive relating to your application. Do not include here any income that you expect to receive from any other source.**

|  |  |
| --- | --- |
| **Income - Details** | **Amount** |
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|  |  |
|  |  |
|  |  |
| **Projected Total** | **€** |

**Declaration:**

I have read the guidelines and criteria for assessment of International Mobility Award Application.

I understand that this is a competitive process and agree to adhere to the criteria and terms and conditions as outlined in the Guidelines Document.

I certify that all the information provided for the purpose of my application is truthful and correct. I attach the requested documents.

I understand that I must return relevant receipts, a set of accounts and a post event report when the event is complete.

Signed: ­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (electronic signatures accepted)

On behalf of: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (organisation/event, if applicable)

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_