

Theatre Board Accessibility Grant Application Form

Form Preview

2023 Theatre Board Accessibility Grant

* indicates a required field

Theatre Board Accessibility Grant

The Theatre Board plays an important part in the cultural life of the University by providing support for performing arts on campus and enrich the ecology of student theatre on campus. The Theatre Board Grants Programs, along with mentoring support, is integral to achieving this.

The Theatre Board offers Accessibility Grants to Student Theatre Groups to assist students with making their work accessible and inclusive for everyone.

Before completing this application form, please read more about UMSU Access Resources [here](#).

The Theatre Board Grant Program is funded by SSAF.

In 2012, The University of Melbourne introduced the Student Services and Amenities Fee (SSAF), in compliance with the [Australian Government's Higher Education Legislation](#), to support and provide a wide range of services and amenities for students, and to support student-focused initiatives.

All students pay this compulsory fee annually. The amount you pay depends on your study load (full time or part-time).

Theatre Board Grant 2023

Have you applied for a Theatre Board Grant for this project in 2023? *

Yes
 No
 I am planning to apply for a Theatre Board Grant

My application relates to an active Theatre Board Universal Grant.

'Active' can mean any of the following perimeters:

- submitted
- in progress for assessment by the Theatre Board panel
- successful

If your current accessibility Grant Application relates to a current Theatre Board (universal) Grant - what is the Application ID Number

example of application ID TB002023

Applicant/Project Leader Name

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Project/Activity Leader

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

The primary contact person for this Theatre Board grant application.

Project/Activity Leader Details

* indicates a required field

Applicant Details

Privacy Notice - We pledge to respect and uphold your rights to privacy protection under the [Australian Privacy Principles](#) (APPs) as established under the Privacy Act 1988 and amended by the Privacy Amendment (Enhancing Privacy Protection) Act 2012.

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

Preferred First Name *	<input type="text"/>
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Pronouns	<input type="text"/>
Word count:	

Primary Contact Number *	<input type="text"/>
	Must be an Australian phone number.

University Email Address *	<input type="text"/>
	Must be a student or staff email address (@student.unimelb.edu.au or @unimelb.edu.au)

Are you a member of a Student Theatre Group? If so, what is the name of the group? *	<input type="text"/>
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Position held in Theatre Group	<input type="text"/>
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Student ID *	<input type="text"/>
	Must be a number. Please ensure that this is typed correctly

Course: *	<input type="text"/>
	E.g. Bachelor of Arts, Master of Social Work, PhD - Faculty of Science

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Expected Graduation Date *

Must be a date.

If you are graduating in the next 6 months, are you inte

If you are graduating in the next 6 months, are you intending on any further study with UOM?

Campus *

- Burnley Parkville Werribee
 Creswick Shepparton Other:

- Dookie Southbank

Select the campus where you are primarily located.

Project/Activity Proposal

* indicates a required field

Project Details

Production/Project Title *

Project / Season Start Date *

The project/activity cannot be already completed when applying for a grant.

Project / Season End Date *

Must be a date.

What access provision are you applying for?

- General Access
Blind and low vision
Deaf and hard of hearing
Captioning
Relaxed Performances

If the provision you are applying for is not noted as an option, please include in the 'Other' section

What are your aims, i.e, why do you want to apply for this grant? *

Please detail your marketing plan for access - ie. please demonstrate how you plan to let people know you're putting on an

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accessible performance.

*

Proposed Budget and Funding Requesting

* indicates a required field

Funding

How much funding are you requesting (Max \$500)? *

Must be a dollar amount.

What is the total financial support you are requesting in this application?

Please upload a quote/invoice or any other documentation as proof of accessibility provision. *

Attach a file:

A minimum of 1 file must be attached.

If applicable, where will you find the remaining funds for the access service?

Certification

* indicates a required field

Project/Activity Leader

Certification

This section must be completed by an appropriately authorised person on behalf of the applicant (may be different to the contact person listed earlier in this application form).

By submitting my Theatre Board Grant Program Proposal, I confirm I have *

I certify that to the best of my knowledge the statements made within this application are true and correct

I understand that if the applicant or applicant group is approved for this grant, I/we will be required to accept the terms and conditions of the grant as outlined in the letter of approval.

At least 2 choices must be selected.

I acknowledge that any unused grant funds of more than \$100 will be returned to the Theatre Board, and any project/activity information provided may be used for promotional purposes. *

Yes

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Please type in your name *

Today's Date *

Must be a date.

Applicant Feedback

You are nearing the end of the application process. Before you review your application and click the SUBMIT button please take a few moments to provide some feedback.

Please indicate how you found the online application process:

- Very Easy
- Easy
- Neutral
- Difficult
- Very Difficult

How many minutes in total did it take you to complete this application?

Must be a number.

Please provide us with your suggestions about any improvements and/or additions to the application process/form that you think we need to consider.