

# Application form - phase 1

## 1. Applicant

1.1 CONTACT PERSON	
Name contact person	<i>this field is automatically populated</i>
E-mail contact person	<i>this field is automatically populated</i>
Telephone number contact person	<i>this field is automatically populated</i>
Would you like to receive all correspondence concerning this application in English?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

  

1.2 ORGANISATION	
Name of the organisation	<i>this field is automatically populated</i>
Organisation's name according to its articles of incorporation as mentioned in the register of the Chambers of Commerce.	<i>this field is automatically populated</i>
Visiting address	<i>this field is automatically populated</i>
Postal address	<i>this field is automatically populated</i>
General e-mail address	<i>this field is automatically populated</i>
General phone number	<i>this field is automatically populated</i>
Website	<i>this field is automatically populated</i>
What was the total number of FTEs within your organisation in the past calendar year (January 1 – December 31), including employees on payroll and regularly engaged freelancers? Enter a number with a maximum of two decimal places.  This question helps us gain insight into the size of organisations supported by the Fund.	
I am / we are a:	<input type="checkbox"/> Individual maker, designer or architect <input type="checkbox"/> Individual observer: programme maker, curator, writer, etc. <input type="checkbox"/> Collective of makers, designers and/or architects <input type="checkbox"/> Publishing house <input checked="" type="checkbox"/> Cultural organisation or institution

- Design agency or other creative enterprise  
 Other

### 1.3 CHAMBER OF COMMERCE DATA

Chamber of Commerce number	<i>this field is automatically populated</i>
The legal form as specified in the register of the Chamber of Commerce	
Name of the legal representative  Fill in the name of the person who, according to the extract from the Chamber of Commerce is authorised to sign on behalf of the applying institution.	
Position legal representative	

### 1.4 SUMMARY

Application number and grant scheme	<i>this field is automatically populated</i>	
Call	<i>this field is automatically populated</i>	
Applicant	<i>this field is automatically populated</i>	
Location and website	<i>this field is automatically populated</i>	

## 2. Project

2.1 APPLICATION INFORMATION	
Application number and grant scheme	<i>this field is automatically populated</i>
Call	<i>this field is automatically populated</i>

  

2.2 SUBSIDY REGULATIONS	
Did you take notice of the Architecture Grant Scheme ?	<input checked="" type="checkbox"/> Yes

  

2.3 TYPE OF APPLICATION	
Is this application a revised application? A revised application is a grant application that, provided with new information, is resubmitted after a negative decision from the advisory committee for a Creative Industries Fund NL grant.	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Is this application a follow-up application? A follow-up application is an application for a project directly resulting from a preliminary research or startup phase subsidised by a Creative Industries Fund NL grant awarded under the Creative Industries Kick-start Grant Scheme or under another startup grant awarded in the years 2023 or 2024.	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Is the application aimed at realising a printed publication?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

  

2.4 PROJECT DESCRIPTION	
What is the project title?	<i>maximum 800 characters, including spaces</i>
Provide a brief summary of the intended project.	<i>maximum 800 characters, including spaces</i>
Which partners are involved in the project?	<i>maximum 800 characters, including spaces</i>
Which discipline best fits your project?	<i>make a choice from the list provided</i>
Briefly describe how the project positions itself within the field of architecture and the selected discipline. How is the project distinctive and of added value compared to existing knowledge or examples within the field?	<i>maximum 800 characters, including spaces</i>

  

2.5 Data project	
What is the intended start date of the project?	<i>Please note: the project start date cannot be earlier than 4 months after the opening date of the grant period for phase I.</i>
The expected funding requirement for this project is between:	<input checked="" type="checkbox"/> € 10.000 - € 25.000 <input type="checkbox"/> € 25.001 - € 50.000

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<b>2.6 Uploads</b>
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Certified extract from the register of the Chamber of Commerce issued no more than one year ago.	
CV(s) of the key performers of the project, or, if the application is submitted by an institution or organisation, a brief description of the mission of the institution or organisation.	
Signed letter(s) of intent from external project partners	

Example

### 3. DECLARATION

3.1 DECLARATION BY LEGAL REPRESENTATIVE	
You submit your application for:	<i>this field is automatically populated</i>
Project title	<i>this field is automatically populated</i>
Name of the organisation	<i>this field is automatically populated</i>
Town/city visiting address	<i>this field is automatically populated</i>
Name contact person	<i>this field is automatically populated</i>
E-mail contact person	<i>this field is automatically populated</i>
Telephone number contact person	<i>this field is automatically populated</i>
Name legal representative	<i>this field is automatically populated</i>
Position legal representative	<i>this field is automatically populated</i>
I, the authorised signatory of the organisation, declare that I have completed the form truthfully and accept the procedure and formal terms and conditions as specified in the relevant grant scheme.	<input checked="" type="checkbox"/> Yes
I declare that I have been authorised by the above-mentioned legal representative of the organisation to submit the form on behalf of the organisation.	<input checked="" type="checkbox"/> Yes
I declare to be the copyright holder of the uploaded image material	<input checked="" type="checkbox"/> Yes
Are all questions completed? Click 'Save draft & continue' to submit the form.	