

# Application form - phase 1

## 1. Applicant

1.1 CONTACT PERSON	
Name contact person	<i>this field is automatically filled with stored data</i>
E-mail contact person	<i>this field is automatically filled with stored data</i>
Telephone number contact person	<i>this field is automatically filled with stored data</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 filled with stored data</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 filled with stored data</i>
Visiting address	<i>this field is automatically filled with stored data</i>
Postal address	<i>this field is automatically filled with stored data</i>
General e-mail address	<i>this field is automatically filled with stored data</i>
General phone number	<i>this field is automatically filled with stored data</i>
Website	<i>this field is automatically filled with stored data</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.	

  

1.3 CHAMBER OF COMMERCE DATA	
Chamber of Commerce number	
The legal form as specified in the register of the Chamber of Commerce	<input type="checkbox"/> Private limited company (BV)

	<input type="checkbox"/> Limited partnership (CV) <input type="checkbox"/> Cooperative <input type="checkbox"/> Sole proprietorship <input checked="" type="checkbox"/> Foreign Legal form <input type="checkbox"/> Professional partnership <input type="checkbox"/> Public limited company (NV) <input type="checkbox"/> Public legal entity <input type="checkbox"/> Foundation <input type="checkbox"/> General partnership (VOF) <input type="checkbox"/> Association
Please fill out the legal form of your organisation	
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 filled with stored data</i>	
Call	<i>this field is automatically filled with stored data</i>	
Applicant	<i>this field is automatically filled with stored data</i>	
Location and website	<i>this field is automatically filled with stored data</i>	

## 2. Project

2.1 APPLICATION INFORMATION		
Application number and grant scheme	<i>this field is automatically filled with stored data</i>	
Call	<i>this field is automatically filled with stored data</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
If yes, what is the application number of the previous application?	
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 Kickstart Grant Scheme or under another startup grant awarded in the years 2023 or 2024.	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

If yes, what is the application number of the previous application?	
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?	
Provide a brief summary of the intended project.	<i>maximum 800 characters, including spaces</i>
Which collaborators 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 €10,000 and €50,000.	<input checked="" type="checkbox"/> Yes

## 2.6 Uploads

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.	

## 3. Declaration

### 3.1 DECLARATION BY LEGAL REPRESENTATIVE

You submit your application for:	<i>this field is automatically filled with stored data</i>
Project title	<i>this field is automatically filled with stored data</i>
Name of the organisation	<i>this field is automatically filled with stored data</i>
Town/city visiting address	<i>this field is automatically filled with stored data</i>
Name contact person	<i>this field is automatically filled with stored data</i>
E-mail contact person	<i>this field is automatically filled with stored data</i>
Telephone number contact person	<i>this field is automatically filled with stored data</i>
Name legal representative	<i>this field is automatically filled with stored data</i>
Position legal representative	<i>this field is automatically filled with stored data</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
If all the required fields have been completed, you can proceed to submit the form in the next step.	

Example