

ADRIE Grant Scheme application form

1. Applicant

1.1 CONTACT PERSON

Is the information below incorrect? The 'Name contact person' and 'E-mail contact person' can only be changed by the Fund by sending an e-mail to mijnaccount@stimuleringsfonds.nl. You can change the phone number yourself by logging into your account.

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 type="checkbox"/> Yes <input type="checkbox"/> No

1.2 LEAD APPLICANT

Your organisation is registered in our system with this data. The name of the organisation is part of the account name. This data can only be changed by the Fund, by sending an e-mail to mijnaccount@stimuleringsfonds.nl. You can change the rest of the data via [your account](#).

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 LEAD APPLICANT

Chamber of Commerce number	
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	
A certified digital extract from the Chamber of Commerce, no more than one year old.	
The deed of incorporation or the most recent articles of association	
The financial statements for the past calendar year (see Article 10.2.j of the grant scheme)	

1.4 BANK DETAILS

We ask for this information in advance so that, if the application is granted, we will be able to process the payment in our records as soon as possible.

Are the bank details below correct? Select 'no' to edit or enter data.	<input type="checkbox"/> Yes <i>if you select 'No', you will be asked to upload a recent bank statement no older than one month.</i> <input type="checkbox"/> No
IBAN (International Bank Account Number) or bank account number (not IBAN)	<i>this field is automatically filled with stored data unless you select 'No'</i>
Foreign bank account SWIFT/BIC	<i>this field is automatically filled with stored data unless you select 'No'</i>
Account holder name	<i>this field is automatically filled with stored data unless you select 'No'</i>
Bank name	<i>this field is automatically filled with stored data unless you select 'No'</i>
Address and city bank (for countries that don't use IBAN)	<i>this field is automatically filled with stored data unless you select 'No'</i>

1.5 CO-APPLICANTS

Legal name co-applicant	Website	Chamber of Commerce number	A certified digital extract from the Chamber of Commerce, no more than one year old.

1.6 PARTNERS

Name partner	Website	Status of the collaboration

1.7 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>	

Example

2. Project

2.1 APPLICATION INFORMATION

Aanvraagnummer en regeling	<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 Artistic & Design Research for Immersive Experiences Grant Scheme ?	<input type="checkbox"/> Yes
The following is derived from the Public Values Guidelines and Self-Assessment for IX. Participants in the consortium declare that within the intended programme of activities: <ul style="list-style-type: none">• The sector-specific good governance framework is applied;• No misleading or manipulative content or applications will be developed;• The (mental) health and safety of the user will not be intentionally endangered;• The personal data collected in line with the GDPR and related privacy legislation will be processed, and not be sold to third parties or otherwise used for purposes other than those of the project or experience itself;• Efforts will be made to investigate how third parties (such as hardware or software providers) deal with data collected from users and bystanders, and whether this is communicated in clear and transparent language;• Written agreements will be/have been made with other parties who process data for the purposes of my application (processing agreement).	<input type="checkbox"/> Yes
Do the consortium participants agree to the conditions set out in Article 12 of the scheme with regard to knowledge development, knowledge sharing and intellectual property, and to the fact that in this context contact details will be shared between all supported consortium parties and CIIC within this scheme?	<input type="checkbox"/> Yes

2.3 PROJECT

The answers below will be submitted to the grant officers in the assessment process. Preferably write your answers in third person (not the "I" form).

What is the project title?	
Briefly summarise the proposed consortium. What would be the roles of the lead applicant, co-applicants and any partners within the consortium?	<i>maximum 1600 characters, including spaces</i>
What are the central research questions and what are the objectives behind the proposed consortium?	<i>maximum 600 characters, including spaces</i>
Briefly summarise the plan towards developing a two-year programme with the consortium.	<i>maximum 600 characters, including spaces</i>

2.4 Themes CIIC Innovation Agenda

<p>Which main and subthemes of the CIIC Innovation Agenda does the application align with?</p>	<input type="checkbox"/> Design Development and Innovation <input type="checkbox"/> Application and Adoption <input type="checkbox"/> Impact and Effectiveness <input type="checkbox"/> Values, Society and consumers
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2.5 START AND END DATE

<p>What is the start date of the project?</p> <p>The starting date has to be after the decision date.</p>	
<p>What is the project's end date?</p> <p>The end date of your project may not be later than the closing date of the grant period for application round B as communicated in Article 6.1.b of the scheme.</p>	

2.6 DISCIPLINES

<p>Which discipline best fits your project?</p>	<p><i>you will find a dropdown list here</i></p>
<p>Do any other disciplines apply?</p>	<p><i>you will find a dropdown list here</i></p>
<p>Does the project involve cultural area of expertise other than architecture, design and/or digital culture?</p>	<input type="checkbox"/> Yes <i>if you select 'Yes', you will find an extra dropdown list: Visual Arts, Cultural participation, Cultural education, Dance, Heritage, Film, Literature, Music, Music theatre, Theatre, Other</i> <input type="checkbox"/> No

2.7 LOCATION

<p>In which country does the project mainly take place?</p>	<p><i>you will find a dropdown list here</i></p>
<p>In which province of the Netherlands or in which area of the Caribbean part of the Kingdom does the project mainly take place?</p>	<p><i>if a country of the Kingdom of the Netherlands is selected above, you will find a dropdown list here</i></p>
<p>In which place(s) will the project mainly take place?</p>	

2.8 FINANCING

Make sure you have your budget with you so that you can copy the correct amounts. These are needed for the administration of Creative Industries Fund NL.

<p>Total project cost</p>	
<p>Co-financing total</p>	
<p>Grant request (total costs – total co-financing)</p>	

For this grant, the maximum amount to apply for is €50,000.

3. Uploads

Use this section to upload the required documents

3.1 UPLOADS	
Proposal	<i>please refer to the ADRIE Grant Scheme manual for maximum file sizes</i>
Budget and funding plan	<i>please refer to the ADRIE Grant Scheme manual for maximum file sizes</i>
CVs of the parties involved (no more than 2 pages per party, A4 in PDF format). Be aware of privacy-sensitive data. The CVs will be presented to the Advisory Committee.	<i>please refer to the ADRIE Grant Scheme manual for maximum file sizes</i>
A relevant portfolio of the involved creators and producers.	<i>please refer to the ADRIE Grant Scheme manual for maximum file sizes</i>
Letters of intent from the participants in the consortium (main applicant, co-applicants), the international partners and/or other partners. If there are multiple letters, combine the documents into a single PDF file.	<i>please refer to the ADRIE Grant Scheme manual for maximum file sizes</i>
One representative image for communication purposes (jpg file format, if possible 150 dpi minimum, 4 MB maximum). Please note: you are the copyright owner of the image or you have permission from the maker / photographer.	<i>please refer to the ADRIE Grant Scheme manual for maximum file sizes</i>
Upload a recent bank statement of the lead applicant (max 1 month old)	<i>only applicable if the pre-filled bank details are outdated or incorrect</i>

4. Knowledge exchange

4.1 DECLARATION

Within this grant scheme/open call, we encourage knowledge exchange between the supported parties. The Fund brings the relevant parties together for this purpose on various occasions and would welcome it if they could also approach each other directly outside these meetings. We need your explicit permission under the GDPR privacy legislation to share relevant contact information (project title, name of contact person and e-mail address) with other supported parties within this grant scheme/open call, if your application is approved.

Project title	<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	<i>this field is automatically filled with stored data</i>
Do you grant permission?	<input type="checkbox"/> Yes <input type="checkbox"/> No

Please note that you have the right to view or withdraw the granted permission at any time, for any reason. Be aware that when you give permission, the information is exchanged by e-mail and restricting further distribution is difficult to enforce.

Example

5. DECLARATION

5.1 DECLARATION BY LEGAL REPRESENTATIVE

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 relevant grant scheme.

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 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 type="checkbox"/> Yes
I declare to be the copyright holder of the uploaded image material	<input type="checkbox"/> Yes