**Technical / Training Assistance Grant (TAG) Application Form**

|  |
| --- |
| Technical Assistance refers to expertise or skilled training provided to a cultural practitioner through attendance / participation in trade events workshops, seminars, conferences or other events for the purpose of improving knowledge, and skills within the sector. It may include the purchase of raw materials or specialist equipment to assist in manufacturing or production.  **GRANTS ARE PAYABLE TO A MAXIMUM OF $5,000.00** |

**The Application Process**

Please read the Cultural Industries Development Fund Information Guide before filling out this application on www.ncfbusinessdevelopment.com.

This application form contains the following:

Part A – Applicant Information

Part B – Training / Technical Assistance Request Details

Part C – Use of Funds

Part D - Declaration

**\*\*Completing an application provides no guarantee of receiving funding assistance.**

**Processing of this application will take about 4-6 weeks.**

**For form queries, please contact the Business Development Department at 417-6646.**

**Part A: Applicant Information**

|  |  |
| --- | --- |
| Individual Requesting Funding |  |
| Position |  |
| Company |  |
| Artists’ Registry Number (if applicable) |  |
| Date of Application | [ ] dd [ ]mm [ ] year |
| Mailing Address & Post Code |  |
| Email Address |  |
| Contact Numbers: | Landline [ ] Mobile [ ] |
| Sector | [ ] Arts & Culture [ ] Design [ ] Media |
| Area within sector |  |
| Fund Amount Requested | $ |
| **Stage of Business / Applicants Experience within the sector (500 words)** | |
|  | |

**Part B: Training / Technical Assistance Request Details**

|  |  |
| --- | --- |
| **All responses should be a maximum of 1000 words** | |
| **REQUEST DETAILS** | Why are you requesting the funding? What do you want to do? How does this fit in with your overall business plans? |
|  | |
| **NEED FOR FUNDING**: | What have been your challenges in sourcing funding to date |
| Identify all sources of funding for training / technical assistance  (e.g. personal loans, gifts, crowdsourcing etc.) |
|  | |
| **VALUE PROPOSITION**: | State the value or impact of the assistance on your cultural / creative business |
|  | |
| **NATIONAL BENEFITS**: | Explain what significant spill-over benefits will accrue to Barbados through the training or technical assistance provided (e.g. diffusion of knowledge and skills, collaborations between businesses etc.) |
|  | |

**Part C: Funding Details**

|  |  |  |
| --- | --- | --- |
| **Amount of Funds Requested:** | | |
| **Break Down of Use of Funds (attach a full budget for the participation in the event / activity)** | **Attach as separate document.** | [ ] |
| **Quotations for each item in the budget from service providers. For product purchases, screenshots are acceptable.** | **Attach as separate documents.** | [ ] |

**Part D - Declaration**

|  |  |
| --- | --- |
| [ ] | I declare that I have read and understood the CIDF Application Form. |
| [ ] | I declare that the proposed application, creative / cultural project and /or any associated expenditure has been endorsed by the applicant's Board or person with authority to commit the applicant to this project. |
| [ ] | I declare that the information contained in this application together with any statement provided is, to the best of my knowledge, true, accurate and complete. |
| [ ] | I understand that the giving of false or misleading information will disqualify the application for a CIDF grant. |
| [ ] | I understand that I may be requested to provide further clarification or documentation to verify the information supplied in this form. |
| [ ] | I acknowledge that if the NCF is satisfied that any statement made in an application is incorrect, incomplete, false or misleading, NCF may, at its absolute discretion, take appropriate action. |
| [ ] | I agree to participate in the periodic evaluation of the services undertaken by NCF. |
| [ ] | I declare that I am authourised to complete this form and to sign and submit this declaration on behalf of the applicant. |
| [ ] | I agree to complete an impact assessment form as part my obligation to NCF. |
| [ ] | I approve of the information in this application. By including my name in this application it is deemed to be my signature for the purpose of this application. |