

Before you get started

Before you start this application it is important that you read the [RADF Guidelines](#) and the [Sunshine Coast Creative Arts Plan 2023-2038](#).

The Smartygrants [FAQ](#) page may also answer some of your questions about using Smartygrants.

Applicants are advised to consult with the relevant Sunshine Coast Council representatives, including a Creative Development Officer, before submission.

For more information and assistance please contact Council's Creative Sector Development Team on artsfunding@sunshinecoast.qld.gov.au.

To help us respond efficiently, please include the following information with your enquiry:

- Applicant name
- Project name
- Your location
- Proposed project dates
- Brief project description (2-3 sentences)
- Links to your work (website and/or social media).

If your project is eligible, you will be invited to **book a free 30-minute consultation** with a RADF Officer. The session provides an opportunity to discuss your project idea and receive guidance to help plan your application.

Office hours are 8.30am-4.30pm Monday to Friday (excluding public holidays).

All applications will be assessed by a panel of peer assessors considering the following:

- Alignment with the Sunshine Coast Creative Arts Plan 2023-2038 - Assessment criteria; merit, viability, reach and benefit. - Diversity of art forms, communities and outcomes supported.

Please only respond to questions or criteria if they are relevant to your application project. Your responses should be relative to scope and scale of your project.

Applicant Details

*** indicates a required field**

Applicant Name

Applicant Type *

- ☐ Organisation - please enter this name in the box below
- ☐ Individual - please enter this name in the box below
- ☐ Group/Collective - please enter this name in the box below. If your group doesn't have an ABN, you will need to nominate a representative and apply as the individual.

RADF Artist Development - Professional Dev. - Application Form

Sept 2026

Form Preview

Applicant Name *

EITHER Organisation/Group/Collective Name OR Individual Name.
Please ensure this name is the same as the name on your ABN
Lookup below

Individual Applicants

Are you an Australian citizenship or permanent resident? *

- ☐ Yes
☐ No (you are not eligible)
If you do not have Australian citizenship or Permanent Residency status, you are not eligible to apply.

Are you a resident of the Sunshine Coast Local Government Area? *

- ☐ Yes
☐ No - Make sure you have established your connection to the area in the question above.

Are you under 18 years of age?

- ☐ No
☐ Yes
If yes, please provide parent/guardian details below

Parent/guardian name (if required)

First Name

Last Name

Required for applicants under the age of 18

In which Sunshine Coast Council local government division do you reside / are you based? *

- | | | |
|---------------------------------|---------------------------------|---|
| ☐ Div. 1 | ☐ Div. 5 | ☐ Div. 9 |
| ☐ Div. 2 | ☐ Div. 6 | ☐ Div. 10 |
| ☐ Div. 3 | ☐ Div. 7 | ☐ Across the whole Sunshine Coast Region |
| ☐ Div. 4 | ☐ Div. 8 | ☐ Outside the Sunshine Coast |

Not sure who your local councillor is, or which division you're in? Find out on the [Electoral Commission of Queensland website](#) (go to webpage and type in your address).

FYI, below is a list of the current Divisional Councillors:

Div. 1 - Cr Jenny Broderick Div. 3 - Cr Tim Burns Div. 5 - Cr Winston Johnston OAM Div. 7 - Cr Ted Hungerford Div. 9 - Cr Maria Suarez

Div. 2 - Cr Terry Landsberg Div. 4 - Cr Joe Natoli Div. 6 - Cr Christian Dickson Div. 8 - Cr Taylor Bunnag Div. 10 - Cr David Law

Sunshine Coast Connection

What is your connection to the Sunshine Coast Local Government Area? (Kabi Kabi / Jinibara Country)

RADF Artist Development - Professional Dev. - Application Form

Sept 2026

Form Preview

Are you a resident? Is your studio based here? Are you collaborating with local artists? Are you a resident? Is your studio based here? Are you collaborating with local artists? Are you presenting your work here? To be eligible for Sunshine Coast Council's RADF Program, you must demonstrate a benefit to the Sunshine Coast Local Government Area. Please note this does not include Noosa.

Activity Details

* indicates a required field

Activity Title *

Must be no more than 10 words.

Brief Activity Description *

Up to 50 words

Full Activity Description *

Word count:

In fuller detail, describe the professional development opportunity: WHAT is the activity? WHERE and WHEN is it taking place? WHO is delivering it? WHY have you chosen it? 200 - 300 words.

Please select your artform from the list below

Artform *

- | | |
|--|---|
| ☐ Cultural Development, Artists working with communities | ☐ Literature/Writing |
| ☐ Dance | ☐ Screen |
| ☐ Heritage | ☐ Craft |
| ☐ Interdisciplinary | ☐ Design, including architecture, fashion |
| ☐ Music | ☐ Digital Arts |
| ☐ Theatre/Performance Art | ☐ Other: |
| | <input type="text"/> |
| ☐ Visual Arts | |

Sunshine Coast Creative Arts Plan Alignment

* indicates a required field

RADF Artist Development - Professional Dev. - Application Form

Sept 2026

Form Preview

Which Sunshine Coast Creative Arts Plan VALUE does your project best align with? *

- ☐ Bold - We are brave risk takers, who experiment and innovate
- ☐ Authentic - We keep it real, do what we say we will, and ensure it is relevant and realistic
- ☐ Inclusive - We welcome, respect, and celebrate diverse perspectives and experiences
- ☐ Sustainable - We care about people, planet, place and prosperity
- ☐ Connected - We build dynamic partnerships and collaborations across sectors, communities, and cultures

Only select one

Which Sunshine Coast Creative Arts Plan GOAL does your project best support? *

- ☐ Empower First Nations - First Nations creativity and contemporary cultural expression is celebrated, emboldened and self-determined
- ☐ Build capacity - the region's creatives, artists and sector are professional, skilled and connected
- ☐ Strengthen engagement - arts audiences grow through genuine participation and a diverse range of meaningful and tailored experiences
- ☐ Boost infrastructure - dynamic places and innovative approaches enable artists and audiences to connect, create and share
- ☐ Cultivate identity - our reputation as a creative region attracts attention, talent and investment

Only select one

Merit

You must demonstrate the artistic or professional merit of this opportunity. Considerations include:

- Quality - Applicant artist and facilitators involved are experienced, highly skilled and well regarded
- Vision - Clear articulation of applicant's vision, goals and career trajectory
- Relevance - Activity offers genuine development opportunity, which is relevant to career stage and supports professional growth
- Rigour - Activity is professionally recognised and demonstrates a competitive or merit based selection process.

You will be asked to provide evidence of artistic merit in Supporting Documentation section.

Describe your arts practice and vision

Word count:

Must be no more than 200 words.

Include career stage and any relevant career achievements, education or training, and artistic motivations.

How will this opportunity extend or deepen your arts practice and support your arts career progression?

RADF Artist Development - Professional Dev. - Application Form

Sept 2026

Form Preview

What are the anticipated outcomes?

What was the selection process?

Was it a competitive and/or merit based selection process? Were you invited to participate? Can anyone apply to attend?

Viability

* indicates a required field

You must demonstrate that your activity is well planned and achievable. Considerations include:

- a clear and realistic project plan, including achievable timelines and complete project budget
- confirmation of participation.

You will be asked to provide evidence of activity viability in Supporting Documentation section.

Activity Schedule

Funded activities must not have already taken place or commenced before notification of grant outcome.

Please upload a complete project plan, including key timelines, in the supporting documentation section.

Start date of funded activity *

Must be a date. This date should reflect the stage of the project that you are requesting funding for. This will likely be first day of event date.

End date of funded activity *

Must be a date. Your acquittal will be due 8 weeks after this date.

Budget

Are you/your organisation registered for GST? *

- ☐ Yes - budget items should NOT include GST
- ☐ No - budget items should include GST

GST status must be as per ABN lookup (see page 1 Applicant Details)

Funding is available for up to 50% of the cost to attend or present at significant industry conferences, workshops and events including travel, accommodation, and tickets.

RADF Artist Development - Professional Dev. - Application Form

Sept 2026

Form Preview

Please complete full project budget, not just the grant portion.

- Identify all activity costs - including all expense items and all income sources: including RADF grant and any other grants you have applied for.
- The total income (including the amount you are seeking from RADF) equals the total expenditure - i.e. there is no profit for the project.

Sample Budget - if you would like to see a sample budget, please click [here](#).

Budget - Cash (note: in-kind items do not go on this table, they go in the second table)

Income - list each cash income source, RADF Grant, other grants, own funds, donations, sponsorships, ticket sales (separate line for each)	\$ Amount of this income	Is this income secured? Y/N	Expenditure - list each item/service you will be purchasing (separate line for each)	\$ Cost of this item/service
RADF grant	\$			\$
	\$			\$
	\$			\$
	\$			\$
	\$			\$
				Hint: Do not use commas, full stops or the "\$" sign in your amounts. There is also no need to add a total - the system will do this for you - see budget totals below the table.

Budget Cash Totals

Total Income Amount - Cash

\$
This number/amount is calculated.

Total Expenditure Amount - Cash

\$
This number/amount is calculated.

Budget - In-Kind

Income - any in-kind contributions (separate line for each)

\$ Value of this income

Expenditure - list what each in-kind contribution is for (separate line for each)

\$ Value of this item/service

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RADF Artist Development - Professional Dev. - Application Form

Sept 2026

Form Preview

Budget In-Kind Totals

**Total Income
Amount In-Kind**

This number/amount is
calculated.

**Total Expenditure
Amount In-Kind**

This number/amount is
calculated.

Total project cost *

This number/amount is calculated.

This should equal total expenditure amount (cash plus in-kind)

RADF grant requested (up to \$1500) *

Please note: RADF funding is competitive and we may not be able to offer the full amount you are requesting. Please note category maximums - refer to RADF guidelines.

Please list the items from your budget that you are requesting funding for *

Please word exactly as shown in budget. If it is all items, just write "All items".

If there is a shortfall in funding amount awarded, please advise how you will address this

Reach and Benefit

* indicates a required field

What are the broader benefits and outcomes of this opportunity, and who do they impact?

- Contribution to a stronger, more connected, or more innovative creative sector
- Potential to share learnings or outcomes with peers or the public.

You will be asked to provide evidence of activity benefit in Supporting Documentation section.

How will this opportunity benefit the Sunshine Coast? *

RADF Artist Development - Professional Dev. - Application Form

Sept 2026

Form Preview

Word count:

Must be no more than 110 words.

How will you share learnings with the local creative community? Are you involved with any local arts groups or initiatives? What are the benefits for other artists, sector, audiences, region?

Data

*** indicates a required field**

Target Group

Arts Queensland and the RADF program are committed to supporting all sectors of the community. The information you provide may be used to measure whether Arts Queensland services are accessible and equitable. Please help us to improve our services by filling out the questionnaire below.

Is your funded activity targeted at a specific group(s) in your community? *

- ☐ Aboriginal people
- ☐ Torres Strait Islander people
- ☐ Australian South Sea Islander people
- ☐ People from a culturally or linguistically diverse background
- ☐ People with a disability
- ☐ LGBTQIA+
- ☐ Older people (55 years+)
- ☐ Young people (12-25 years)
- ☐ Children (0-11 years)
- ☐ Women
- ☐ Men
- ☐ Career stage - emerging
- ☐ Career stage - established
- ☐ People who experience disadvantage
- ☐ Not applicable

Please select 'not applicable' if your activity is open to all members of the community and is not specifically targeted to a particular group

Participation

Please estimate expected project participation below as closely as possible

Number of artists/cultural workers employed *

Total number of artists/people employed (on contract or permanent basis) as artists or arts and cultural workers over the duration of the activity

Number of First Nations artists/cultural workers employed

Number of participants *

Number of people who actively participate in activities, eg attend a class to make something, sing in a choir, participate in a training workshop

Number of First Nations participants

Number of partnerships

Must be a number.

Number of sectors partnered with (if relevant) *

Enter 0 (zero) if none. If partnership developed as part of

RADF Artist Development - Professional Dev. - Application Form

Sept 2026

Form Preview

Must be a number.

Total number of First Nations artists/people employed as artists or arts and cultural workers over the duration of the activity

Number of other people employed in other paid positions *

Total number of people employed over the duration of the activity (on contract or permanent basis) engaged in a role other than an artistic/cultural role

Must be a number.

Number of attendees *

Number of people who attend activities as audience members, eg see an exhibition, watch a performance, listen to a talk, etc.

Number of volunteers *

Total number of people engaged as volunteers to support delivery of activity (including artists)

delivery of activities, note down the types of sectors partnered with, eg arts, health, education, business, tourism etc

Which sectors have you partnered with? (if you answered with a number above)

eg arts, health, education, business, tourism etc

Number of activities/events/products

Must be a number.

Number of new works

Must be a number.
Optional

No. of beneficiaries (don't answer. This is calculated)

This number/amount is calculated.

Priorities

What, if any, State Government priority will your activity address?

- ☐ Celebrate heritage
- ☐ Identify and sense of place
- ☐ Activate places and spaces
- ☐ Increase and elevate locally produced arts and cultural activities
- ☐ Develop skills and capacity of local artists and artworkers

What, if any, Local Government priority will your activity address?

- ☐ Livability and placemaking (events, activations, activities, trails, town centre regeneration)
- ☐ Economic development
- ☐ Youth engagement
- ☐ Infrastructure (connectivity (walking/cycling), precinct development)
- ☐ Sport, recreation, health and wellbeing
- ☐ Inclusivity and diversity
- ☐ Community safety
- ☐ Not applicable

What, if any, local RADF priority will your activity address?

- ☐ Livability and placemaking (events, activations, activities, trails, town centre regeneration)
- ☐ Economic Development
- ☐ Youth Engagement

What, if any, Arts & Cultural priority will your activity address?

RADF Artist Development - Professional Dev. - Application Form

Sept 2026

Form Preview

- ☐ Celebrate heritage, identity and sense of place
- ☐ Activate places and spaces
- ☐ Increase and elevate locally produced arts and cultural activities
- ☐ Develop skills and capacity of local artists and artworkers
- ☐ Facilitate cross-industry partnerships and collaborations to increase social impact of arts activities
- ☐ Facilitate social outcomes through arts activity including health and wellbeing and social cohesion
- ☐ Maximise opportunities for First Nations creatives
- ☐ Not applicable

Activity

What type of activity will you undertake? *

- ☐ Community consultation/strategy development
- ☐ Creative development of new work
- ☐ Cultural tourism
- ☐ Events/festivals
- ☐ Exhibitions
- ☐ Heritage protection/promotion
- ☐ Performances
- ☐ Placemaking
- ☐ Professional development/workshop
- ☐ Promotion and marketing
- ☐ Publication/recording
- ☐ RADF officer/committee training
- ☐ Other

Payment and Contact Details

* indicates a required field

Please indicate below details of the Bank, Branch and Account Number into which you wish to have your payment made if your application is successful.

Name of your bank *

Bank BSB number *

Name on Account *

This is the name in which the bank account is held. Organisations must write name of the organisation's account. For individuals, bank account must be in applicant's name.

Bank Account number *

A copy of your bank statement header is required for all applicants who have NOT previously received a grant payment (OR current applicants who have changed their bank details). This copy should show the Account Name, BSB and Account No.

Has your organisation previously been paid a grant by SCC into the bank account you nominated above? *

- ☐ No - please attach a copy of your bank statement below
- ☐ Yes - there is no need to attach a bank statement

Attach copy of your bank statement header here (showing the details you provided above)

Attach a file:

I have attached a copy of my bank statement header *

- ☐ Yes - it is attached here
- ☐ I was unable to attach it, so I will email it to grants@sunshinecoast.qld.gov.au
- ☐ N/A Not required

Please authorise Sunshine Coast Council to create an invoice for payment *

- ☐ I agree to allow Sunshine Coast Council to use the details provided in this application, including the business ABN, GST status and address, to create an invoice for payment of the grant funds to my business, and that my business will not create its own invoice for this payment.

Please provide ABN (the ABN must be in the name of the applicant or their business) *

The ABN provided will be used to look up the following information. Click Lookup above to check that you have entered the ABN correctly.

Information from the Australian Business Register	
ABN	
Entity Name	
ABN Status	
Entity Type	
Goods & Services Tax (GST)	
DGR Endorsed	
ATO Charity Type	More information
ACNC Registration	
Tax Concessions	
Main Business Location	

The ABN number provided will be used to look up your GST status

RADF Artist Development - Professional Dev. - Application Form

Sept 2026

Form Preview

Contact Details

Organisation/Individual Physical Address (not post office) *

Address

If your address doesn't appear automatically, choose "Can't find my address" and then enter manually

Contact person *

First Name

Last Name

This MUST be the same person who certifies the application on the final page.

Position of contact person (if part of an organisation)

Phone number *

Home or mobile number

Email address *

Must be an email address.

Do you personally identify as belonging to one or more of the target groups listed? *

- ☐ Aboriginal people
- ☐ Torres Strait Islander people
- ☐ Australian South Sea Islander people
- ☐ From a culturally or linguistically diverse background
- ☐ Person with a disability
- ☐ Older person (55 years plus)
- ☐ Youth (12 - 25 years)
- ☐ Children (0 - 11 years)
- ☐ LGBTIQA+
- ☐ Men
- ☐ Women
- ☐ Career stage - emerging
- ☐ Career stage - established
- ☐ People who experience disadvantage
- ☐ Not applicable

Hint: This information helps us ensure our programs are inclusive and accessible. We may also use this information to let you know about relevant opportunities. Responses are confidential and voluntary.

Supporting Documentation

* indicates a required field

RADF Artist Development - Professional Dev. - Application Form

Sept 2026

Form Preview

Suitable formats to upload include JPEG, MP3, MP4, MPEG Video, PDF, Word files. You can also insert weblinks to your material (**weblinks won't be 'clickable' on this form, but the RADF Panel can copy and paste them into a browser to view**).

Please attach one consolidated file for each item.

Artistic Merit

Program outline or schedule

Attach a file:

Should include key outcomes.

Information about host organisation

Attach a file:

Can also include a link in weblink below

Resumes and/or CVs *

Attach a file:

Please attach a resume/CV for each artist or artsworker receiving RADF funding. Compile into one document for upload.

Work examples *

Attach a file:

Please attach work examples for each artist or artsworker receiving RADF funding. Compile into one document for upload.

Compiled audio/film/dance content (if relevant)

Attach a file:

Please attach one file only of up to five minutes of content.

Weblink 1

This could be a link to your online presence eg. website, Instagram, other.

Weblink 2

This could be a link to your online presence eg. website, Instagram, other.

Activity Viability

Quotes

RADF Artist Development - Professional Dev. - Application Form

Sept 2026

Form Preview

Attach a file:

Quotes are recommended for significant items over \$1,000 to assist the panel to assess viability. Compile into one document for upload.

Letter of selection or invitation

Attach a file:

Attach emails or letters confirming availability of others involved. Compile into one document for upload.

Activity Reach and Benefit

Letters of support are a valuable source to show that there is support for your activity. The most valuable evidence of support will come from either the industry or those that will benefit to verify need, demand and relevance. Letters of support are not required from the mayor, councillors or other council programs e.g. Horizon.

Letters of support

Attach a file:

Compile into one document for upload.

Other Supporting Documentation

Other

Attach a file:

Privacy and Certification

*** indicates a required field**

Privacy

Council will use any personal information provided for the purpose of processing your grant application and for remaining in contact with you. Council is authorised to collect this information in accordance with the Local Government Act 2009 and other local government Acts. Your personal information is only accessed by persons authorised to do so.

Please note the information provided on your grant application and in any related documentation/discussions may be provided to members of the assessment panel in order to assist council in processing your grant application.

If your application is successful, council may disclose the following Information to Arts Queensland:

- the information you provide in your grant application
- the amount of funding you receive
- the information you provide in your outcome report and

RADF Artist Development - Professional Dev. - Application Form

Sept 2026

Form Preview

- text and images relating to your funded activity.

By submitting an application you consent to council or Arts Queensland publishing the applicant's name, project description and amount funded on our/their website. This information may also be used for promoting council's grant program.

Your personal information is dealt with in accordance with council's [Privacy Policy](#).

I agree to the privacy statement above * ☐ Yes

Certification

I am authorised to complete this form and I agree that:

- the statements made in this application are true
- all necessary copyright, permits, approvals and licences will be obtained prior the beginning of the project
- the project will be covered by appropriate insurance
- all relevant health and safety standards will be met
- council does not accept any liability or responsibility for the project
- I/my organisation has met all acquittal conditions and has no debt to council, or if so I/ we have entered into scheduled payment arrangements with Council which are being met

If successful, I will:

- ensure that acquittal requirements are met within 8 weeks of the nominated project completion date
- ensure that funds are claimed within one month of notification, except where there is a co-funding requirement
- accept the terms of the grant in accordance with council requirements
- provide proof of successful co-funding (other grant sources) within six months of notification
- complete the project within twelve months of receiving council funding
- provide one head shot and two promo shots

I agree to the above * ☐ Yes

Authorised person's name *

Title

First Name

Last Name

For applicants under 18 years of age, this must be a parent or legal guardian

Telephone number *

Subscribe

I'd like to subscribe to relevant arts funding and artist opportunities from Sunshine Coast Council:

- ☐ Yes
☐ No

RADF Artist Development - Professional Dev. - Application Form

Sept 2026

Form Preview

Including Artist Edition

Submit

You are now ready to submit. Read and acknowledge message below, then click on “Next page” to review, then Submit.

☐ You will receive a confirmation email when your application has been submitted. If you do not receive this email then your application has NOT been submitted. Please ensure all questions have been answered and try again. (Check box here to acknowledge that you understand this)