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Ref. No

Date of Receipt

FILM FUND: APPLICATION FORM – AUDIENCE DEVELOPMENT

A. NAME OF PROJECT:

B. GENRE (Film Festival / Market):

C. COMPANY DETAILS:

Company Name:

Registration Company Number:

Physical Business Address:

Postal Address:

Contact Name:

Home Telephone:

Cell Phone:

E-mail:

D. Non- South African Component:

Please specify any non-South African component of the project (e.g. investors, administration team, and international screening).

E. Ownership

The Applicant must be the director or a legal representative of the organisation or company seeking funding.

Are you aware of any claims against your control or ownership in the screening of the films? _____

Yes | No

F. Previous Submissions:

Have you applied for Audience Development before

Yes No

If yes, was the application successful?

Yes No

Please provide the amount received _____

Please list titles screened, if any _____

G. Please briefly mention any other similar (including this one) project/s you are involved in and the status of the project.

I/We declare that the information provided herein and in the supporting documentation appended to this application is accurate.

SIGNATURE(S): _____

DATE: _____

CO-APPLICANT: _____

DATE: _____

At the time of application, together with this completed form, the applicant *must* provide *all* of the documentation listed below. Please be advised that during the evaluation of your project, the applicant may be required to provide additional documentation or information. KwaZulu Natal Film Commission reserves the right to request any document or information it deems relevant, including, but not limited to, any document or information pertinent to the eligibility of the applicant and the project.

Documents to be submitted:

- A completed application
- A one-page letter of motivation for funding
- A valid certificate / letter of exemption from the Film and Publication Board to screen films publicly
- A copy of the project's synopsis, not exceeding 15 lines
- A detailed marketing strategy
- Detailed project budget and financing structure / plan
- A signed approval on a company letterhead from film owner to screen their film/ production to public
- A list of films to be screened
- Company profile
- Certified copies of identity documents of applicants.

PLEASE NOTE:

- All relevant information should be attached as pdf or zip folder
- No links to pdf or zip folder will be accepted
- Should the applicant or recipient not be contactable for 2 months at the given address or contact number from the date of receipt or grant the application or the grant will be cancelled, should there be a change of contacts the onus is on the applicant to notify KwaZulu Natal Film Commission
- No application shall be returned to the applicant
- Should the applicant become the recipient, she/he will be the signatory of the contract and/or on behalf of the company
- Proposals that do not adhere to the above criteria will be disqualified.

ACCESS AND EQUITY

The KwaZulu Natal Film Commission aims to provide equitable access to South Africans to its funding initiative regardless of their racial background, culture, sex, physical or intellectual disability. In order to assist in monitoring performance in this regard and comply with statutory obligations, it would be greatly appreciated if you would complete the following details and include it with your application. Statistics generated from this information will be presented in aggregate and will not form part of your application.

APPLICANT:

Project Title: _____				
Your Name: _____				
Date: ___/___/_____		Date of Birth: ___/___/_____		
Please tick with an X in the appropriate box.				
Are you male or female?	M	<input type="checkbox"/>	F	<input checked="" type="checkbox"/>
Race?	B	<input type="checkbox"/>	W	<input checked="" type="checkbox"/>
Do you have any physical disability?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
Are you a South African citizen?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
Are you a South African resident?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
Which Province are you from? _____				