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|  | **Murweh Shire Council****95-101 Alfred St, Charleville Q 4470****🕿 07 4656 8355 🖂 mail@murweh.qld.gov.au** |

**Regional Arts Development Fund 2024-2027**

**Outcome Report**

**All activities that receive RADF funding (including individual career development, arts and cultural projects and activities or council initiated projects) are required to complete and submit this outcome report template to council within 8 weeks of project completion.**

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| Project Details  | Your response |
| Activity/Project Name:  |  |
| Applicant Name:  |  |
| Year funding was received:  |  |
| Activity start date: |  | Activity completion date: |  |
| RADF investment provided: | **$** |

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| Contact Person  | Your response |
| Contact Name: |  |
| Phone Number: |  |
| Email:  |  |
| Postal Address:  |  |

1. **Range and number of activities delivered as part of the project**

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| Type of activity | Number of activities  |
| Community consultation, arts research or policy development  |  |
| Creative development of new work |  |
| Cultural tourism |  |
| Events and Festivals |  |
| Exhibitions & Collections |  |
| Performances  |  |
| Placemaking |  |
| Professional or career development activity / opportunity / training  |  |
| Publications |  |
| Workshops (creative)  |  |
| Other (please specify): |  |

1. **Artform of project**

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| Artform  | Please tick one option  |
| Community Arts & Cultural Development |  |
| Dance |  |
| Heritage |  |
| Multi-arts |  |
| Music |  |
| Theatre |  |
| Visual Arts, Craft and Design |  |
| Writing |  |

1. **Key Stats and Outcomes**

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| **Data required** | **Definition****(see Data Dictionary in appendix for further detail, including counting rules)** | **Your response** |
| Number of attendees | People who attend activities and events as audience members e.g. to see an exhibition, watch aperformance, listen to a talk |  |
| Number of participants | People who actively participate in activities e.g. attend a class to make something, sing in a choir,participate in a training workshop |  |
| Number of artists/ cultural workersemployed | People employed (on contract or permanent basis) as artists or arts and cultural workers over durationof project |  |
| Number of people employed in otherpaid positions | People employed over the duration of project (on contract or permanent basis) who were engaged in arole other than an artistic/cultural one |  |
| Number of volunteers | People engaged as volunteers to support delivery ofyour activities |  |
| Types of sectors partnered with (if relevant) | If partnerships (financial or non-financial) developed to deliver your activities, types of sectors partnered with - e.g. arts, health, education, business, tourismetc. |  |
| Percentage of attendees and participants who rated your activity asgood or excellent | Percentage of survey respondents answering ‘good’ or ‘excellent’ to the question: *Overall, how would you rate this activity? (response options: excellent, good, average, poor, very poor)* |  |
| Number of surveyrespondents | The total number of survey responses received |  |
| Brief description of how you gatheredsurvey data |  |
| Include any direct quotes from your surveys that you wishto share |  |

1. **Did this project have outcomes for career / practice development?** 🞎Yes (complete below) 🞎No (move to question 5)
* *NOTE: Question 4 IS ONLY REQUIRED to be completed by individuals undertaking career/professional development or training projects. If completing on behalf of a number of artists – survey their responses to the questions below as part of the project evaluation.*

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| --- | --- | --- |
| As a result of this project I have….  | Yes / No  | How |
| Developed new skills and knowledge |  |  |
| Explored new directions in my arts or cultural practice  |  |  |
| Taken my career to the next level of professionalism  |  |  |
| Developed new professional industry networks  |  |  |
| Developed new audiences or markets  |  |  |
| Contributed to my local community through sharing what I have learnt with others  |  |  |

**REFLECTIONS**

What do you see as the top three outcomes from the activity? (max. 150 words)

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What were your main learnings and reflections?

* Key successes?
* What worked well and /or what would you do differently next time?
* Did you experience any particular challenges and how did you overcome these?
* Did you make any significant changes from what you originally proposed to do?
* Do you have any tips you would give other people doing similar work?

Are there any future opportunities or partnerships underway as a result of your activities?

 (max. 200 words)

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1. **Statement of Income and Expenses**

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| **INCOME** includes total RADF grant other financial and in-kind contributions  | **TOTAL** of each income item | **EXPENDITURE** | **TOTAL COST** of each expenditure item. | **RADF** components (must equal grant amount) |
| Earned Income (eg: ticket sales)  |  | Salaries, Fees and Allowances |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
| Contribution from Artists and Others (Please note this is inkind as IK or $)  |  | Project or Activity Costs |  |  |
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| Other Grants |  | Promotion, Documentation and Marketing |  |  |
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|  |  |  |  |  |
| Sponsorship, fundraising and donations (Please note where this is inkind as IK) |  | Administration |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
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| RADF GRANT  |  | RADF GRANT  |  |  |
| TOTAL INCOME |  | TOTAL EXPENDITURE |  |  |

1. **Do you have any unspent RADF money?**  🞏 No / 🞏 Y*e*s

**IF YES - have you returned the unspent RADF money?**

 🞏 Yes, I have attached with this Outcome Report all documents relating to the return of unspent RADF money and copies of the documents outlining this transaction.

 🞏 No - Please contact your Council RADF Liaison Officer and inform them of the unspent RADF money. Remember that failure to do so may affect your future applications to the program.

**SUPPORT MATERIALS**

**List all the support material you are including that demonstrates the success of the project**.

EG: weblinks, press clippings, event program, photographs, advertisements and written responses to your project - where possible please supply a CD or USB of electronic versions of your support materials

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**DECLARATION**

**Declaration by Recipient**

* I certify that to the best of my knowledge, information detailed in this report (and relevant attachments) is true and correct.
* I understand I may be asked to provide the Council with additional information on the funded project.
* I understand that the Council and RADF Committee may nominate my project to Arts Queensland as an example of best practice.

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| Signature:Note: If you are under the age of 18, your legal guardian must also sign this application |  | Date: / /   |
| Name in full: |  |
| Position in group or organisation: (if applicable) |  |