

#### 2024-2025 PROJECT 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.

PROJECT INFORMATION					
Project Details		Your response			
Project Name					
Applicant Name					
Year funding was received					
		E Reference Number			
RADF investment provided	\$	from Council Remittance	E		
	Advice				
Contact Person		Your response			
Contact Name					
Phone Number					
Email					
Postal Address					
Information requested		Your response			
Brief description of funded					
activity - 100 words					
(who, what, when, where, why, how)					
		1			
Project Starting Date		Project Completion Date			
Postcode/s of the location/s					
where you undertook activities					
KEY STATISTICS AND OUTCO	MES				
1. Type of activity			Number of activities		
Creative development of new wo	ork				
Cultural tourism					
Events and Festivals					
Exhibitions & Collections					
Performances					
Placemaking					
Professional or career developm	ent activity / opportun	ity / training			
Publications					
Workshops (creative)					
Other (please specify):					
2. Artform (Please tick one op	tion)				
☐ Music ☐ Dance ☐ Theatr	e 🗌 Multi-arts 🗌 W	riting 🗌 Heritage 🔲 Visual A	Arts, Craft & Design		
3. Data Required			Response		
Number of attendees					
Number of participants					
Artists and cultural workers emp	loyed				
People employed in other paid p	ositions				
Number of Volunteers					
Types of sectors partnered with (e.g. arts, health, education, business, tourism)					
% of attendees and participants who rated your activity as good or excellent					
Number of survey respondents					
Brief description of survey method (e.g. written survey, verbal survey)					
Insert any direct quotes from your surveys that you wish to share:					

F0484



4. Did this project have outcomes for professional/career development?
Yes (complete below) No (move to Question 5)
NOTE: Question 4 IS ONLY REQUIRED to be completed by individuals undertaking career/profession
development or training projects
Number of artists involved in career/ professional development or training project
As a result of this project I have Please tick appropriate response
I developed new skills and knowledge:
Strongly agree Agree Neutral Disagree Strongly disagree
I explored new directions in my arts or cultural practice:
Strongly agree Agree Neutral Disagree Strongly disagree
It took my career to the next level of professionalism:
☐ Strongly agree ☐ Agree ☐ Neutral ☐ Disagree ☐ Strongly disagree
I developed new professional industry networks
Strongly agree Agree Neutral Disagree Strongly disagree
I developed new audiences or markets
☐ Strongly agree ☐ Agree ☐ Neutral ☐ Disagree ☐ Strongly disagree
5. Reflections
What do you see as the top three outcomes for you from this activity (max. 150 words)?
what do you doe do the top three editorned for you norm the dottvity (max. 100 words).
What were your key learnings or reflections from the activity that will inform your work in the future? This mig
include things that worked well, challenges or other observations (max. 200 words).
misiado amingo and wom, snamongos or outor observatione (max. 200 words).
Do you have any tips you would give other people doing similar work?
be you have any upe you would give outer people doing chillian work.
Are there any future opportunities or partnerships underway as a result of your activities?
6. Did your project respond to any of the local and state priorities listed below?
Yes (complete below) No (move to question 7)
Local and State Priorities
☐ Sharing stories and celebrating our history. How will your project respond to this priority?
Activating places and spaces. How will your project respond to this priority?
☐ Elevating First Nations arts. How will your project respond to this priority?
☐ Strengthening our community by creating partnerships. How will your project respond to this priority?
Drive serial shapes series the state Havyvill very series the series to this series to 0
☐ Drive social change across the state. How will your project respond to this priority?

PO Box 189 CHARTERS TOWERS QLD 4820 Administration: 12 Mosman Street ABN 67 731 313 583 Telephone: (07) 4761 5300 Email: mail@charterstowers.qld.gov.au Website: www.charterstowers.qld.gov.au

F0484



7. Did your RADF project target engagement of specific groups below?					
☐ Yes (complete below) ☐ No (move to question 9)					
If yes, please select indicate the number of people engaged that identify with a specific community group and					
explain how this engagement was			munity are not co	onsidered to be	
targeted engagement - do not com	·,	)		1	
Group	Number involved	Group		Number involved	
Tourists	Involved	Aboriginal/Torres Strait Isla	Involved		
Regional Queenslanders		Australian South Sea Island			
People with a disability		People from CALD backgro			
Children aged 0-11 years		Women			
Young people aged 12-21 years		Men			
Seniors aged 55 years+		Other (please specify)			
8. Statement of Income and Exp	enses				
INCOME	TOTAL		TOTAL COST	RADF	
includes total RADF grant other financial and in-kind contributions	of each income item		of each expenditure item	Components	
A Earned Income (e.g. ticket sales)		Salaries, Fees and Allowances			
Contribution from Artists		Project or Activity			
B and Others		Costs			
(Please note if inkind as IK or \$)					
		5 "			
C Other Grant Income		Promotion,  Documentation and			
C Other Grant Income		Marketing			
		Warketing			
Sponsorship, fundraising and donations		J Administration			
(Please note where inkind as IK)		7 tariii ilotratiori			
RADF GRANT		RADF Component			
(Maximum 60% of F)		(Amount = E)			
TOTAL INCOME		TOTAL			
<b>F</b> (A+B+C+D+E=F)		K EXPENDITURE			
It is essential that $F = K$ (G+H+I+J=K)					
9. Do you have any unspent RADF money?					
□ No □ Yes					
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					



List all the support material you are including that demonstrates the success of the project.  For example: weblinks, press clippings, event program, photographs, advertisements and written responses to your project - where possible please supply a USB of electronic versions of your support materials  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
your project - where possible please supply a USB of electronic versions of your support materials  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.
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.
<ul> <li>Declaration by Recipient</li> <li>I certify that to the best of my knowledge, information detailed in this report (and relevant attachments) is true and correct.</li> <li>I understand I may be asked to provide the Council with additional information on the funded project.</li> </ul>
<ul> <li>Declaration by Recipient</li> <li>I certify that to the best of my knowledge, information detailed in this report (and relevant attachments) is true and correct.</li> <li>I understand I may be asked to provide the Council with additional information on the funded project.</li> </ul>
<ul> <li>Declaration by Recipient</li> <li>I certify that to the best of my knowledge, information detailed in this report (and relevant attachments) is true and correct.</li> <li>I understand I may be asked to provide the Council with additional information on the funded project.</li> </ul>
<ul> <li>Declaration by Recipient</li> <li>I certify that to the best of my knowledge, information detailed in this report (and relevant attachments) is true and correct.</li> <li>I understand I may be asked to provide the Council with additional information on the funded project.</li> </ul>
<ul> <li>Declaration by Recipient</li> <li>I certify that to the best of my knowledge, information detailed in this report (and relevant attachments) is true and correct.</li> <li>I understand I may be asked to provide the Council with additional information on the funded project.</li> </ul>
<ul> <li>I certify that to the best of my knowledge, information detailed in this report (and relevant attachments) is true and correct.</li> <li>I understand I may be asked to provide the Council with additional information on the funded project.</li> </ul>
example of best practice.
Signature:  Note: If you are under the age of 18, your legal guardian must also sign this application
Name in full:
Position:
(if applicable) SURVEY ON RADF ROGRAM MANAGEMENT
The Regional Arts Development Fund (RADF) is a partnership between the Queensland Government and local councils. Information from your report is provided to Arts Queensland as evidence about the type of activities, communities engaged and outcomes achieved through RADF in your local area.
Your local council also has a number of specific Key Performance Outcomes they need to gather evidence about throughout the year to report back to Arts Queensland including that:  • Local people are engaged as decision makers about RADF; and  • Local communities and partners are satisfied with Council's management of RADF  Please complete the following survey about RADF program management in your local area. If you have any questions or concerns about completing this survey you can contact Charters Towers Regional Council at mail@charterstowers.qld.gov.au or Arts Queensland at radf@arts.qld.gov.au  1. How would you rate your satisfaction with Council's approach to engaging local communities in RADF decision making? (e.g. setting local priorities, determining the model for RADF delivery or making funding decisions)    Not Satisfied   Satisfied   Very Satisfied  2. How would you rate your satisfaction with your council's management of the RADF program?    Not Satisfied   Satisfied   Very Satisfied  3. Please provide any feedback for council on how they can strengthen their community engagement and program management or delivery of RADF in your local area.

The information collected on this form will be used by the Charters Towers Regional Council for the purpose of processing and assessment of your application/request. Your personal details will not be disclosed for a purpose outside of Council protocol, except where required by legislation (including the Right to Information Act 2009 and Information Privacy Act 2009). This information will be stored on Council's database. The information collected will be retained as required by the Public Records Act 2002.

Telephone: (07) 4761 5300

F0484

Email: mail@charterstowers.qld.gov.au

Website: www.charterstowers.qld.gov.au



# **OUTCOME REPORT CHECKLIST** - to be completed by applicant.

		COUNCIL USE ONLY	
<b>✓</b>	REQUIREMENT	1 <sup>st</sup> Officer ✓	2 <sup>nd</sup> Officer ✓
	All Outcome Report questions are complete in full		
	Outcome Report submitted no more than eight (8) weeks after the conclusion of the project		
	If applicable, changes to the project were given written approval by Council and proof attached		
	At least ten (10) <b>quality</b> digital photographs/slides of both the event and the lead up to the event are supplied		
	Clear, scanned copies of evidence of income and expenditure (e.g. receipts, remittance advice from Council) for entire project are attached		
	Budget figures and receipt amounts are identical		
	All receipts and remittances etc are dated within the project timeframe or if not, a satisfactory reason is provided		
	Media release detailing outcomes of the activity is attached for Council use		
	Any additional conditions placed on the activity by the RADF Committee have been met		
	Support material including, but not limited to, social media screen prints, press clippings, event program, photographs, advertisements and written or digital responses to your project feedback, is attached		
	Outcome Report is signed by applicant and auspicing body (if applicable)		
	Unspent RADF grant money has been returned to Council (if applicable)		

COUNCIL USE ONLY								
Funding Year 2024-2025 Funding Round			Application ECM No Amo		Amoun	unt Approved \$		
Outcome Report ECM No Committee		e Approval ECM No		Date Receive / /				
1 <sup>st</sup> Officer Name			Signature			Date		
2 <sup>nd</sup> Officer Name			Signature			Date		

PO Box 189 CHARTERS TOWERS QLD 4820 Administration: 12 Mosman Street ABN 67 731 313 583 Telephone: (07) 4761 5300 Email: mail@charterstowers.qld.gov.au Website: www.charterstowers.qld.gov.au

F0484