

SPECIAL PROJECTS AWARD APPLICATION FORM

(A) Applicant's Details (Please fill in relevant sections)							
For Individuals							
Name				Gender			
Date of Birth / Age				Nationality			
Contact No.				Primary Country of Residence			
Occupation				Email			
Mailing Address							
Are v	ou staff or	Faculty Staff		Programme			
alumi		Alumni		Year Graduated from NAFA			
Whic you ii	h discipline are n?	Visual Arts Interdiscip		rforming Arts Literal Iltidisciplinary Desig	•		
on yo	Please provide details on your professional practice						
For C	Collectives						
Name	e of Collective			Formation Date			
Mailing Address				Email			
Name of Primary Applicant				Primary Applicant's Role in Group			
Are you staff or alumni?		Faculty Staff		Programme			
		Alumni		Year Graduated from NAFA			
Artists in the collective (Please indicate Primary Applicant)							
S/N	Full Name	Nationality	Country of Residence	Mailing Address	Email	Contact No.	

(B)	Project Proposal	
		Competition / Others: Showcase
(i)	Project Type	Research / Innovation
		Community / Place making
(ii)	Please provide the	e context, aim, objectives and outcome of the proposed project.
	Competition / Sh	
	Indicate the releva	ant details; how will the output benefit the NAFA community?
		ration rch topic? How do you intend to explore and investigate the topic? e and to whom it will be presented? Any potential continuity with industry
	Community / Place What impact do yo	ce making ou hope the project will have on the community?

(C) Project Timeline a Description of Work	Duration (in weeks)	Start Date (DD-MM-YY)	End Date (DD-MM-YY)

(D)	Personnel					
(i)	No. of participants required for the project					
(ii)) Selection criteria					
	List down the competencies or skill s	sets required for the pa	articipants			
	(iii) List of identified students / alumni (if applicable)					
	List down the students or alumni whom you think will be suitable for the project.					
SPU will also assist in identifying participants based on the criteria given above.						
S/N	Full Name	Programme	Course	Remarks		

escription of Work	Project Lead	Additional Mentor (if applicable)	Participant (Student/Alumni)	
 (v) List down any required facilities and other support you would need during the project. (You may refer to resources and facilities available at NAFA at https://360virtual.nafa.edu.sg/) 				
<u></u>				

(E) Checklist and Declaration					
Checklist					
Please ensure that you have attached the following documents in PDF (.pdf) format to this form:					
Project Proposal					
Plans and Milestones					
Budget Form					
Artist / Designer Profile					
Curriculum Vitae with two supporting references					
Portfolio	l				
Please ensure that the total file size does not exceed 5MB. Alternatively, you may send a link for	1				
access to the required documents.					
OR					
Provide a link to your online portfolio.					
Declaration					
I, the undersigned:					
1. Certify that all information submitted is accurate and complete.					
2. Agree to let NAFA use this information for the purpose of assessment, which includes making the					
information available to assessment panellists.					
If the applicant is a collective, the declaration must be read and signed by the Primary Applicant of the					
collective.					

For Official Use:

(F) Submission				
Submission by:		Received by:		
Name and Signature of Applica		Nam	e, Designation and Signature	
Name and eightatore of Applica		Null		
			Dete	
Date			Date	
(G) Assessment & Evaluation				
Interviewed & approved by:				
Full Name	Designation		Signature & Date	
Awarded amount for the project:				