



national film and video foundation
SOUTH AFRICA

an agency of the

Department of Arts and Culture

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Ref. No

Date of Receipt

SUBMISSION GUIDELINES

Please submit the following with the production application form.

- A one to two page letter of motivation
- A brief synopsis not to exceed one page
- A treatment or project outline (Fiction projects submit a narrative treatment and Documentaries submit a detailed outline)
- A completed screenplay if available
- A detailed development budget in addition to the top sheet in this application
- A summary of curriculum vitae
- A detailed development schedule
- A certified copy of the applicant's South African identity document
- Original tax clearance form from SARS

PLEASE NOTE:

- Summaries of CVs of the individuals making up the development team (**co-writer, writer, researcher, etc**) **must be included**
- Attach relevant copyright information
- **Four copies of the entire proposal package must be submitted (including the application)**
- **Do not fax or e-mail application**
- **Do not bind or staple material in any fashion other than using a two-hole punch with file fasteners.**
- Successful applicants will receive letters of intent. In order to secure the grant the recipient will be required to sign an agreement with NFVF
- NFVF has previously experienced problems with contacting applicants at addresses and contact numbers provided. 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 NFVF
- No applications shall be returned to the applicant
- Do not submit any extra material, e.g. videos, photographs, etc (**unless requested**)
- 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.

FILM FUND: APPLICATION FOR DEVELOPMENT FUNDING

A. TITLE OF PROJECT

B. APPLICANT

Name of Applicant:	
Physical & Postal Address: (Please include Province)	
ID Number:	
Home Telephone:	
Work Telephone:	
Cell Phone:	
Fax:	
e-mail:	

C. COMPANY DETAILS

Company Name:	
Company Registration Number:	
Physical Business Address:	
Postal Address: (Please include Province)	
Contact Name:	
Home Telephone:	
Work Telephone:	
Cell Phone:	
Fax:	
Email:	

Synopsis of Company Profile

	Male	Female
Number of permanent employees		
Number of permanent Black (African, Indian, Coloured) employees		
% of Shareholders Equity owned by Blacks (African, Indian, Coloured)		
Number of Black (African, Indian, Coloured) employees in Senior/Executive Management Positions		
Number of Black (African, Indian, Coloured) employees in Junior Management positions		

D. CATEGORY

<input type="checkbox"/>	Feature	Total Running Time in Minutes <input type="text"/>
<input type="checkbox"/>	Short film	
<input type="checkbox"/>	Documentary	
<input type="checkbox"/>	Other – specify:	

Genre:

Logline – A brief one line description of your story:

Proposed Shooting Format (tick more than one if applicable)

<input type="checkbox"/>	35mm
<input type="checkbox"/>	16mm
<input type="checkbox"/>	Video(HiDef, Digibeta, DVCam, MiniDV, BetaSP, etc.)
<input type="checkbox"/>	Other – specify:

E. PRINCIPAL CREATIVE TEAM

	Name	Contact Number	Male	Female
Director:				
Producer:				
Writer:				

F. NON SOUTH AFRICAN COMPONENT:

Please specify any non-South African component of the project (e.g. locations, investors, principal creative team, artists).

G. COPYRIGHT

The Applicant must be the originator of the script, treatment or outline concerned, or be the holder of copyright or have an option to the rights in any and all works on which the project is to be based.

	Yes	No
Original Idea? If no, attach full details on a separate sheet.		
True Story / Real Life Characters? If yes, attach full details on a separate sheet. If partially based on or drawn from a true story or involving real life characters, attach full details on a separate sheet.		
Underlying work/third party content? If yes, attach full details on a separate sheet.		
Are you aware of any claims against your control or ownership of the rights?		

H. Financial Plan Summary

INVESTOR	COMMITTED		PENDING	
	AMOUNT	%	AMOUNT	%
TOTALS				

I. PREVIOUS SUBMISSIONS:

	YES	NO
Has the project been submitted previously?		
If yes, was the application successful?		

Previous Project Number

Please list former titles of this project, if any.

Was the project submitted for development or production?

J. PLEASE BRIEFLY MENTION ANY OTHER (INCLUDING THIS ONE) PROJECT 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:** _____

- It is not necessary to complete all classifications, only those relevant to your project and its particular stage of development.
- Please include a detailed development budget in addition to this top sheet
- NFVF does not fund retrospectively.
- NFVF reserves the right to negotiate amendments to this budget as a condition of the provision of funds.

Category	Applicant s Contribution		NFVF s Investment		Other Funding
	Cash	Deferred	Previous	Requested	Committed
Options on Rights					
Purchase of Rights					
Writer's Fee					
Producer's Fee					
Script Editor's Fee					
Office overheads					
Research					
Legal Fees (if applicable)					
Sub-Totals					
TOTAL DEVELOPMENT BUDGET REQUESTED:					

ACCESS AND EQUITY

The NFVF aims to provide equitable access by 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 form and will not form part of your application.

WRITER

Project Title: _____

Your Name: _____

Date: ____ _ Date of Birth: _____

Please tick with an X in the appropriate box.

Are you male or female?	M	F
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Race?	B	W
-------	---	---

Do you have any physical disability?	Yes	No
--------------------------------------	-----	----

Are you a South African citizen?	Yes	No
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Are you a South African resident?	Yes	No
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Which Province are you from? _____

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DIRECTOR

Project Title: _____

Your Name: _____

Date: ____ ____ ____ Date of Birth: _____

Please tick with an X in the appropriate box.

Are you male or female? M F

Race? B W

Do you have any physical disability? Yes No

Are you a South African citizen? Yes No

Are you a South African resident? Yes No

Which Province are you from? _____

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PRODUCER

Project Title: _____

Your Name: _____

Date: ____ ____ ____

Date of Birth: _____

Please tick with an X in the appropriate box.

Are you male or female?	M	F
-------------------------	---	---

Race?	B	W
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Do you have any physical disability?	Yes	No
--------------------------------------	-----	----

Are you a South African citizen?	Yes	No
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Are you a South African resident?	Yes	No
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Which Province are you from? _____