**APPLICATION FORM**

**RELEASE - The Business of Independent Label Management 2015**

## APPLICATION CHECKLIST

COMPLETED APPLICANT DETAILS - PAGES 1 - 2;

SIGNED AND DATED APPLICANT DECLARATION – PAGE 3;

COMPLETED HALF PAGE HISTORY OF THE COMPANY OR BUSINESS - PAGE 4;

COMPLETED HALF PAGE PROFESSIONAL BIOGRAPHY OF APPLICANT - PAGE 5;

COMPLETED HALF PAGE STATEMENT DESCRIBING WHAT YOU HOPE TO ACHIEVE BY ATTENDING THE COURSE - PAGE 6;

COMPLETED HALF PAGE STATEMENT OUTLINING WHY YOU SHOULD BE CHOSEN TO ATTEND THE COURSE - PAGE 7

*INCOMPLETE APPLICATIONS WILL NOT BE CONSIDERED*

**APPLICATIONS TO BE EMAILED BY CLOSE OF BUSINESS FRIDAY 25 SEPTEMBER 2015 to:**

**release@amin.org.au**

## APPLICANT DETAILS

|  |  |
| --- | --- |
| **FULL LEGAL NAME OF APPLICANT** | Type name here |
| **COMPANY NAME** | Type name here |
| **COMPANY LEGAL STRUCTURE** | SOLE TRADER  PARTNERSHIP  COMPANY  OTHER - Specify: |
| **APPLICANT’S POSITION IN COMPANY** | OWNER  CO-OWNER  EMPLOYEE |
| **WHAT GENRE/S DOES YOUR LABEL TYPICALLY RECORD?** | Type here |
| **POSTAL ADDRESS** | Type address here |
| **SKYPE ADDRESS** | Type address here |
| **PHONE (W)** | Type number with country and std codes here |
| **PHONE (MOBILE)** | Type number with country code here |
| **EMAIL** | Type address here |
| **WHAT IS THE HIGHEST LEVEL OF FORMAL EDUCATION THAT YOU HAVE COMPLETED?** | LEFT HIGHSCHOOL PRIOR TO GRADUATION  GRADUATED FROM HIGHSCHOOL  TAFE/EXTRAMURAL NZ POLYTECH  UNDERGRADUATE DEGREE  POSTGRADUATE STUDIES |
| **HAVE YOU UNDERTAKEN A BUSINESS COURSE BEFORE?** | YES  NO  IF YES, WAS IT:  A SHORT COURSE LIKE NEIS  TAFE/POLYTECH  UNIVERSITY |

## INFORMATION ON YOUR BUSINESS PRACTICES

***(This information will not be used to assess your eligibility for the program. It will assist us with decisions on course content)***

|  |  |
| --- | --- |
| **DOES YOUR BUSINESS CURRENTLY USE THESE DOCUMENTS?** | WRITTEN BUSINESS PLAN?  YES  NO  PROFIT & LOSS STATEMENT?  YES  NO  BALANCE SHEET?  YES  NO |
| **DO YOU HAVE PAID STAFF?** | YES  NO  IF YOU DO, HOW MANY? Type here |
| **DO YOU HAVE INTERNS?** | YES  NO  IF YOU DO, HOW MANY? Type here |
| **DOES THE LABEL PROVIDE YOUR MAIN SOURCE OF INCOME?** | YES  NO  IF NO:  WHAT PROPORTION OF YOUR INCOME IS DERIVED FROM YOUR LABEL? (PERCENTAGE) Type here  WHAT IS YOUR MAIN SOURCE OF INCOME? Type here |

**DIVERSITY**    
The Australian Music Industry Network (AMIN) is committed to the equitable and effective delivery of RELEASE to a diverse population. In order to assist in monitoring AMIN's performance in relation to diversity, please provide the following information. This data will be kept confidential and not used to identify you. It is only used to generate aggregated statistics.

**GENDER**

Female  Male  Other/Prefer not to say

**COUNTRY OF BIRTH**

Australia   New Zealand  Other (Please Specify) Type history here

**ARE YOU OF INDIGENOUS DESCENT?**

Yes  No

If yes, please indicate whether you identify as

Aboriginal

Maori

Torres Strait Islander

Other (Please Specify) Type history here

**DO YOU SPEAK A LANGUAGE OTHER THAN ENGLISH AT HOME, OR DID YOU DO SO IN YOUR CHILDHOOD HOME?**

Yes   If yes, which language do/did you speak at home? Type history here

No, English Only

**DO YOU HAVE A DISABILITY?**

Yes If yes, please specify: Type history here

No

**APPLICANT DECLARATION**

By applying for a place in RELEASE, the applicant agrees to commit to the program’s timeline and requirements. The applicant acknowledges that they have read and understood the program guidelines published by the Australian Music Industry Association (AMIN), in particular acknowledging that AMIN reserves the right to vary any of their terms and conditions without notice.

The applicant agrees and understands that selection is discretionary and that the final interpretation of the guidelines and the decision to approve applications rests with AMIN.

The applicant declares that the information given herein and in all attachments is, to the best of the applicant’s knowledge and belief, true and correct.

The applicant undertakes to advise AMIN of any significant changes to the information supplied or the materials submitted regarding the project.

It is agreed that AMIN will not be liable for any action or claim based on any industrial or intellectual property of the applicant arising out of, or in connection with AMIN’s receipt, custody or consideration of the applicant's submission.

The current schedule requires successful applicants to take part in the residential workshop at Hepburn Springs near Melbourne from 29 November – 2 December 2015, complete a SWOT analysis and course reading prior to the workshop, complete a business plan after the workshop and make themselves available for feedback on their business plans at a date to be advised in March 2016. Finally, program participants will be required to attend a two day residential program in the Fundamentals of Financial Modeling to be held near Melbourne in April 2016.

During the course of the workshops, still photographs and video footage may be taken of proceedings for archive and publicity purposes. Only non-commercially sensitive proceedings will be captured. By agreeing to participate in the residential workshops, you also agree that AMIN may use any visuals taken during the workshops in all and any mediums for the purposes of promoting the program. You give permission for the use of your name, likeness, biographical material and stills for this purpose.

The applicant further acknowledges that AMIN may vary the dates of the workshops in its absolute discretion subject to provision of 14 days’ notice to the applicant.

The applicant agrees that all course materials and information disclosed during the workshops will be treated strictly as commercial in confidence.

**I confirm that I have read and agree to the contents of the above declaration.**

**SIGNED:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ DATED:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**APPLICATIONS TO BE EMAILED BY CLOSE OF BUSINESS**

**FRIDAY 25 SEPTEMBER 2015 to:**

**release@amin.org.au**

**You will receive confirmation your application has been received from AMIN. If you do not receive acknowledgement of your application within two business days, please contact release@amin.org.au**

### NO HARD COPY APPLICATIONS WILL BE ACCEPTED.

**HISTORY OF COMPANY OR BUSINESS**

**(HALF PAGE ONLY)**

**If successful in your application, this information will be published in the Course Book for the information of those attending the workshop**

Type history here

**PROFESSIONAL BIOGRAPHY OF APPLICANT**

***(HALF PAGE ONLY)***

**If successful in your application, this information will be published in the Course Book for the information of those attending the workshop**

Type biography here

**WHAT YOU HOPE TO ACHIEVE BY ATTENDING THE COURSE**

***(HALF PAGE ONLY)***

**If successful in your application, this information will be published in the Course Book for the information of those attending the workshop**

Type statement here

**WHY YOU SHOULD BE CHOSEN TO ATTEND THE COURSE**

***(HALF PAGE ONLY)***

Type statement here