**THE LOWRY'S SCRATCH NIGHTS X GALLERIES TAKEOVER**

**APPLICATION FORM**

**SECTION A: PERSONAL DETAILS**

**Please confirm that you are 18 years old or over?**

Please note that this opportunity is only for artists aged 18 years or over – yes or no

**Email –**

**Full Name of Lead Artist –**

**Pronouns of Lead Artist –**

**Full Names & Pronouns of Group Members –**

If applying as a group, please provide full names of all company members. If applying as an individual, please state here “N/A” –

**Contact telephone number of Lead Artist –**

**Address including postcode of Lead Artist –**

**What area of Greater Manchester are you based in?**

Bolton –

Bury –

Oldham –

Rochdale –

Stockport –

Tameside –

Trafford –

Wigan –

Manchester –

Salford –

Outside Greater Manchester –

**If outside Greater Manchester, please say where –**

**Please let us know if you/your company members have any access requirements and what support you/your company members might need to take part?** **–**

**If your application is selected, please confirm that you are available to take part in Scratch Nights on Thursday 9 May, 7pm -10pm at The Lowry in Salford. Technical Rehearsals on Tue 7 - Fri 9 May** –yes or no

**SECTION B: PROPOSAL**

How would you like to submit your application?

I would like to submit this section by filling in this form –

I would like to send a video or voice application (Please note: If you are sending in a video or voice application, please copy the link to your Dropbox, Google Drive or other file sharing folder (where you have uploaded the video/voice note), into the text box of each of the following questions. Do not forget to include a password if there is one.) –

**1. Please tell us about you and your work (up to 250 words)**

**2. Please include a link to your website, social media page or/and photos or short video links of your previous work (up to 3 links maximum)**

**3. Please provide an outline of the \*new idea you would like to develop for Scratch Nights (up to 250 words) \*a new idea is one which has not yet been shown publicly in the UK and/or has not received significant development support.**

**4. What would you specifically like to gain from this opportunity? - e.g. test certain material, find the answer to a creative question, work out next steps for your project.**

**5. How many artists will be involved in the development and presentation of this work?**

**6. Please outline any technical requirements you might need (as much as you know/think at this point).**

**EQUAL OPPORTUNITIES FORM**

Please also complete an equal opportunities form, which we will keep separate from your application

This form is anonymous and none of the information collected on this form will be used in any decision-making process for The Lowry's Artist Network Opportunities. All data collected will be treated in accordance with the Data Protection Act 2018 (DPA 2018), The General Data Protection Regulation 2016/679 and the Privacy and Electronic Communications Regulations 2003.

The questions in this section are required because The Lowry takes its responsibility to widening its reach and offering artist development opportunities towards inclusion, diversity and representation seriously; its Artist Development programme also receives money from a number of public funding bodies (for example, the Arts Council), and we are asked to report back information on the demographics within the network. Please choose the "prefer not to say" option for each question if you do not consent to sharing the information.

**1. How would you describe your gender? Please indicate – yes where it applies.**

Male –

Female –

Non-binary –

Prefer not to say –

**2. What is your sexual orientation? Please indicate – yes where it applies.**

Bisexual –

Gay Man –

Gay Woman/Lesbian –

Heterosexual/Straight –

Prefer not to say –

Other (please specify) –

**3. What is your ethnicity? Please indicate – yes where it applies.**

Asian British -

Asian Bangladeshi -

Asian Indian -

Asian Pakistani -

Any other Asian background (please specify) -

Black British -

Black African -

Black Caribbean -

Any other black background (please specify) -

East Asian British -

East Asian Chinese -

East Asian Japanese -

East Asian Korean -

South East Asian -

Any other East Asian or South East Asian background (please specify) -

Mixed Heritage (please specify) -

White & Asian -

White & East Asian -

White & Black British -

White & Black African -

White & Black Caribbean -

White British
White English -

White Scottish -

White Welsh -

Northern Irish -

Irish -

Prefer not to say -

Other (please specify) -

**4. What is your age? Please indicate – yes where it applies.**

Under 21 –

21-24 –

25-34 –

35-44 –

45-54 –

55-64 –

65+ –

Prefer not to say –

**5. Do you identify as D/deaf or disabled person, neurodivergent or/and mental health experience, or have a long-term health condition?** **Please indicate – yes where it applies.**

There is no detriment to your registration if you have a health condition. The Disability Discrimination Act 1995 states that a ‘person has a disability for the purpose of this Act if he/she has a physical or mental impairment which has a substantial and long term adverse effect on his/her ability to carry out normal day to day activities’.

Yes, limited a lot –

Yes, limited a little –

Yes, limited but can vary significantly day-to-day -

No –

Prefer not to say –

**5. Have you experienced barriers as a result of being working class?**

Yes –

No –

Prefer not to say –

Not known –

**6. If you feel you have experienced other barriers not covered by the above, on which you feel we might be able to ask for data, please tell us here. This will help us refine this process and improve both reporting and our actions.**

**THANK YOU!**

Thank you for taking the time to complete the registration and equal opportunities monitoring form. Please note: this application form will close on **Wednesday 28 February 2024, 5pm**. All artists will be notified by **Friday 8 March 2024**.