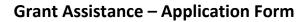
## **National Arts Council**





## **Personal Information**

Name:		Surname:					
	lual, Senior Partner)						
Group N	Name:			(Associo	ition, Federations)		
	Address:						
	: Phone(s):						
Email A	ddress:						
Nationa	ality: Seychellois or a Resider	nt:					
<u>Affiliati</u>	on with Art Associations						
Are you	a member of any art associa	ations? State:					
	tate why:						
Type of	fassistance required						
	s your contribution to the pr						
Notes:							
• ,	Required supporting document breakdown (Should be submited Performance) Proforma invoiced must be attached.  Applications without supporting NAC will assist an artist ONLY of Request for assistance by the self has already been assisted, will assist the right to assist the right than ri	ted for all requests, e, Copy of NIN, Reg g document will <u>no</u> once a year, depend ame artist for a sec only be considered	, without find the process of the process of the process on the condition on the condition on the condition on the condition of the condition	cail) Invita Certificate ssed project during the	tion letter (i.e. Overseas , Copy of bank cards same year that he/she		
	rtify that I/We agree with all th nd procedure, before submissio		, and have	read and	understood the Grant		
Name: _	Sig	nature:	[	Date:			