

# Location Offset - Application for Provisional Certificate - Training 2024

## Form Preview

### Location Offset - Application for Provisional Certificate - Training Program

#### When to submit

Applications for a provisional Location Offset Training Program Certification can be made at any time.

The Location Offset operates under [Division 376 of the Income Tax Assessment Act 1997](#).

These guidelines should be read in conjunction with the ITAA97 and the Location Offset Rules (as amended by the Location Offset Amendment Rules 2024) (the Location Offset Rules), made pursuant to section 376-260 of the ITAA97. A link will be provided shortly.

#### Before you begin

Applicants that intend to develop a long-term structured training program are strongly encouraged to apply for *Provisional Certification – Training Program*. This is to allow consideration of the proposed training program before it is established and rolled out across productions.

#### **Before you complete this Application Form please note:**

- The [Location Offset Guidelines](#) and [Glossary](#) must be read in conjunction with this form, and are available at [arts.gov.au/funding-and-support/tax-rebates-film-and-television-producers](https://arts.gov.au/funding-and-support/tax-rebates-film-and-television-producers).
- Throughout the application form, the term 'production' is used to refer to all eligible formats (feature films or films of a like nature, miniseries of television drama).
- Towards the end of this application you will have the opportunity to attach all required supporting documentation.
- During the assessment the assessor may seek additional documents and information.

#### Confidentiality

The Department uses this form to collect information, including some personal information, that is required to process this application for Provisional Certification – Training Program under the Location Offset. For further information about the Department's privacy obligations, (including in relation to how to access or correct personal information or make a complaint) and our contact details for privacy matters, please see our [Privacy Policy](#).

Information provided by the applicant is held by the Department on a strictly sensitive basis and in line with the provisions of Division 355 of Schedule 1 of the *Taxation Administration Act 1953*.

However, some information may be provided to other bodies to assist in the administration of the Australian Screen Production Incentive (ASPI) or for other purposes as required by law. These include:

- Application information will be provided to the Film Certification Advisory Board (FCAB) and / or an independent film production consultant contracted by the Department.

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These parties are bound by Commonwealth Government confidentiality and privacy provisions.

- Limited information about the training program/ activities/skills gaps targeted may be disclosed to Screen Australia, Australian Film Television Radio School or the relevant state or territory screen agency for the purposes of determining eligibility.
- Aggregate and non-identifying information may be used by the Commonwealth for the purposes of reviewing the ASPI.
- Where required by law, information collected may be provided to other agencies or departments of the Commonwealth, including the Australian Tax Office.

## Contact details

**If you require any assistance in completing the form please contact the Screen Incentives Section on:**

**Email:** [filmenquiries@arts.gov.au](mailto:filmenquiries@arts.gov.au)

**Phone:** +61 (02) 6136 8012

**Mailing Address:** Screen Incentives Section Department of Infrastructure, Transport, Regional Development, Communications and the Arts GPO Box 2154 Canberra ACT 2601 AUSTRALIA

## Applicant Company details

\* indicates a required field

The company that applies for *Provisional Certification - Training Program* should be the company that developed and will run the training program. The company should also be able to identify what productions will be seeking to be associated with it.

Alternatively, if there are multiple different companies associated with the training program, a production services coordinator may apply to *Provisional Certification - Training Program* on all their behalf.

### Registered Entity Name / Legal Business Name:

Organisation Name

Please ensure your registered entity name is correct and matches the information provided in the ABN lookup provided below.

### Applicant ABN:

The ABN provided will be used to look up the following information. Click Lookup above to check that you have entered the ABN correctly.

Information from the Australian Business Register
ABN

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Entity name
ABN status
Entity type
Goods & Services Tax (GST)
DGR Endorsed
ATO Charity Type <a href="#">More information</a>
ACNC Registration
Tax Concessions
Main business location

Must be an ABN.

### Place the company is incorporated:

Please give the State or Territory.

### Registered business address: \*

Address

  

Address Line 1, Suburb/Town, State/Province, Postcode, and Country are required.

### Postal Address: \*

Address

  

Address Line 1, Suburb/Town, State/Province, Postcode, and Country are required.

## Applicant Contact Information

\* indicates a required field

The Department may not be able to discuss this application with people unless they are nominated as either Primary Contact or Secondary Contact in this form.

**Please ensure all relevant contacts are included and correct.**

### Primary Applicant Contact

#### Applicant Admin Contact

Title	First Name	Last Name
<input type="text"/>	<input type="text"/>	<input type="text"/>

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**Primary contact position**

**Primary contact phone number**

**Primary contact email**

Secondary Applicant Contact

**Secondary contact \***

Title      First Name      Last Name

<input type="text"/>	<input type="text"/>	<input type="text"/>
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**Secondary contact position \***

**Secondary contact phone number \***

**Secondary contact email \***

Must be an email address.

## Details of the Proposed Training Program

\* indicates a required field

**Will the training program be managed by a training provider or coordinator? \***

Yes

No

**Please provide details: \***

**Please provide the name of your proposed training program: \***

**Please provide a short summary of the proposed training program: \***

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**How will you recruit the individual trainees that will take part in the proposed training program? \***

Alleviating capacity constraints in the Australian screen industry

**Explain how the proposed training program will contribute to alleviating workforce capacity constraints in the Australian screen sector: \***

**What skills shortage and/or skills gaps areas in the Australian screen industry, including above-the-line or below-the-line skills and/or skills in post, digital and visual effects skills areas, will the proposed training program target? \***

**How did you identify the skills shortage and skills gaps areas that the training program will target? \***

**Will the training program promote or encourage industry partnerships to increase the production capability with the Australian screen sector? \***

Yes

No

**Please provide details: \***

Health and safety, diversity and inclusion in the Australian screen industry

**Will the training program promote or encourage initiatives directed at promoting cultural, physical or mental health safety on productions? \***

Yes

No

**Please provide details \***

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**Will the training program promote or encourage equity, diversity and inclusion initiatives to support increased participation by people from groups underrepresented in the Australian screen industry, particularly First Nations or people with a disability? \***

Yes  No

**Please provide details: \***

**Will the training program promote or encourage placements, attachments and mentoring for trainees from regional and remote Australia? \***

Yes  No

**Please provide details: \***

**How did you identify the skills areas and/or key screen job roles that the training program will target? \***

## Production Credit

**Will the training program provide work-based learning resulting in an individual attaining or progressing towards a full credit on a Location Offset production? \* \***

Yes  No

**Please provide details: \***

## Proposed productions and training delivery

\* indicates a required field

A training program is defined as a structured program that is designed to train one or more individuals to support two or more productions. Please provide details about all of the productions that are intended to be tied to the training program, what training

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opportunities are proposed to be available and what training will be delivered. To add additional Productions, please click 'Add more'.

Please note: A training program can only include productions that commence principal photography or production of the animated image on and after 1 July 2024.

Please provide details of the productions that intend access the training program. These details do not need to be finalised for provisional certification.

### Production details

#### Production Title \*

#### Production format: \*

- Television series
- Mini-series
- Feature film or film of a like nature

#### Production genre: \*

- Live action (drama)
- Animation
- Documentary
- Reality
- Infotainment
- Lifestyle
- Light Entertainment

### Estimated QAPE and TPE

#### Estimated QAPE \*

Must be a whole dollar amount (no cents).

#### Estimated Total Production Expenditure (TPE) \*

Must be a whole dollar amount (no cents).

### Anticipated production dates

#### Anticipated date of commencement of principal photography in Australia \*

Must be a date.

#### Anticipated date of completion of principal photography in Australia \*

Must be a date.

### Training coordinator details

#### Name \*

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Title	First Name	Last Name
<input type="text"/>	<input type="text"/>	<input type="text"/>

**Email \***

Must be an email address.

**Phone \***

Must be an Australian phone number.

**Estimated number of specific training opportunities to be provided**

**Above the line \***

Must be a whole number (no decimal place).

**Below the line \***

Must be a whole number (no decimal place).

**Proposed roles for trainees**

**Enter trainee and role details below, including how long each trainee is expected to be engaged on the production (in number of days, weeks or months)**

**Please return additional lines for each entry. Format example:**

**Trainee 1 - Role Name - X days**

**Trainee 2 - Role Name - X weeks**

\*

**Proposed diversity of trainees**

**First Nations \***

Must be a whole number (no decimal place).

**Regional or Remote \***

Must be a whole number (no decimal place).

**Disability \***

Must be a whole number (no decimal place).



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### **Culturally or Linguistically Diverse \***

Must be a whole number (no decimal place).

### **Other \***

Must be a whole number (no decimal place).

### **Proposed level of experience of each trainee**

Entry level: someone who has only been working in the industry for less than 5 years.

Emerging / mid-career: someone who has been working longer than 5 years in the industry.

Experienced / upskill: someone who is upskilling within their chosen field of expertise.

### **Entry level \***

Must be a whole number (no decimal place).

### **Emerging / mid-career \***

Must be a whole number (no decimal place).

### **Experienced / upskill \***

Must be a whole number (no decimal place).

### **How do you propose to deliver the training on this production? Tick all that apply.**

\*

- Work-based learning
- Formal training courses
- Mentoring / shadowing
- Other:

### **Additional information**

**If you have any further information to provide about the training program that you consider relevant, please detail it here:**

## Declaration and confirmation

\* indicates a required field

Additional information

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**If you have any further information to provide in relation to your application, please upload it here:**

Attach a file:

## Digital declaration

You are required to make the following declaration under Part B of Schedule 1, Part B of the Location Offset Rules

The information provided in your application (and in any subsequent requests for additional information) will be used by the Department to administer the Location Offset. The *Taxation Administration Act 1953* imposes administrative penalties on any entity that makes a false or misleading statement, or takes positions that are not reasonably arguable, to the Commissioner of Taxation or another entity exercising powers or performing functions under a taxation law. When submitting information to support your application to the Location Offset it will be deemed to be made as a tax declaration; any such statement could attract substantial penalties under taxation laws

## Confirmation

**I, the applicant contact, confirm that \***

- I am authorised by the applicant company to complete this application.
- information provided in this application may be provided to the Australian Taxation Office, the Film Certification Advisory Board, Screen Australia, and independent film production consultants contracted by the Department.
- to the best of my knowledge, all the information in this application is true and correct.

At least 3 choices must be selected.

**Date \***

Must be the date this application is submitted and in DD/MM/YYYY format.