



FOR OFFICE USE ONLY	
Request received on: ____ / ____ / 2026	Request Reference Number: MCG ____ / 26 / ____

Micro Grant

APPLICATION FORM

Name of Applicant

Title of Project

Date of Request submission

Total Amount Requested

(Maximum amount that can be requested under this Fund is Euro 3,000. Applicants may request up to 100% of the total cost)

Reference Number

Deadline: Rolling Call until 13th October 2026 (noon)

1. MICRO GRANT PROPOSAL

1.1. Micro Grant Description Summary

Provide a summary of the project description in not more than 150 words. Should the proposal be awarded funding, this description will be featured on artscouncil.mt.

1.2. Did you ever benefit from public funds?

☐ Yes

☐ No

1.3. If yes, kindly specify the name/s and dates of the funds awarded in the past three years.

2. BUDGET

2.1 Add Maltese VAT Certificate of Registration
Upload file

2.2 Tick where applicable

☐ Registered under Article 10*

☐ Registered under Article 11 (Exempt)

*Applicants registered under Article 10 who will recover VAT, need to exclude recoverable VAT from the budget.

+ Add a document issued by the Office of the Commissioner for Revenue showing that the applicant is a taxpayer in Malta

Upload file

2.3 Download the De Minimis Form through the below link, fill it in, and sign.

[Press to download form](#)

Upload the filled in and signed De Minimis declaration form

2.4 Please specify your NACE code: _____

Add a document showing the NACE code category of the applicant

For queries about your NACE Code visit: <https://nso.gov.mt/nsos-business-register/>

2.5 Expenditure Supporting Service
Purchase
Rental
Expense

Income	Total amount requested from fund
	Add Other sources of income (if applicable)

Mandatory Documentation:

- + Quotations for expenses requested through the proposal
- + An audio or audiovisual file not exceeding 5 minutes in which the applicant provides a short description, a rationale and/or motivation for submitting this proposal

Additional Documentation:

- + Media showing the artistic ability of the applicant
- + Samples of work
- + Add files

3. LINKED PROJECT/ACTIVITY/EVENT INFORMATION

3.1. Project Type _____

3.2. Primary area of activity _____

3.3. Secondary area of activity _____

3.4. Project/Activity/Event Description

Insert a description of the project/activity/event directly linked to the micro grant proposal.

Kindly keep in mind that the evaluation will be based upon the following criteria:

- Does the proposed project contribute to the advancement of the applicant's practice?
(Yes or No)
- Does the applicant demonstrate to have the ability to carry out the proposed artistic work?
(Yes or No)

4. TIME FRAME

Provide details regarding the project, activity or event.

Start Date ____/____/____ (Eligible timeframe 01/01/2027 – 31/12/2027)
End Date ____/____/____

Step 1: _____ From: ____/____/____ to ____/____/____ Description:
Step 2: _____ From: ____/____/____ to ____/____/____ Description: (Add steps as required)

5. PROFILES

CV Insert CV of applicant

Profile 1	Name	
	Role	
	Bio Note	
	CV	Insert CV of Profile 1

Add Profiles as required