



VALLETTA
CULTURAL
AGENCY

Valletta Cultural Agency
Exchange Buildings
Republic Street
Valletta VLT 1117
MALTA
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Email: info@vca.gov.mt

InnovAiR 2023@VDC - Application Form

- Name of the person filling this application: *
- On behalf of: (Name of Entity if applicable)

DETAILS OF THE APPLICANT*

- The applicant must be the main designer or practitioner in a design related discipline, and lead the proposed project
- Name:
- Organisation (if applying on behalf of an organisation):
- Business Address: *
- Identity Card / Passport Number: *
- Country of residence: *
- Mobile Phone Number: *
- Email Address for communication purposes:



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GOAL SETTING

- Please provide a concise description of your vision and your project, highlighting expected outcomes (max 200 words)

- Please list any collaborators you envisage to work with before and during the residency (names), and what their role within the project is expected to be.

TIMELINE AND IMPLEMENTATION

- Please submit an estimated timeline for your project. (max 300 words)

RELEVANCE TO THE CALL

- Is there an element of innovation in your project? Can you describe it? (150 words max) (max 20marks in the evaluation)



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- Please describe how your proposed project targets one or more of the residency's three primary objectives as described in the call's 'About the residency' section? (150 words max) (max 30 marks in the evaluation)

- The concept of sharing knowledge and learning by doing is at the core of the VDC, together with the goal to support the development of its members by offering opportunities which would help them grow personally and professionally.

Is there a collaborative element in your project? Please describe if and how you will engage with local communities in the field of design or any other type of community. (150 words max) (max 30 marks in the evaluation)

- Will your project trigger discussion and interaction with various publics? How do you plan to disseminate your project and results? (100 words max) (max 20 marks in the evaluation)



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FUNDING

- Is this residency project receiving any third-party funding? If yes, please indicate the name(s) of the funding partner(s) within your proposal, what they will fund and the amount which is being provided. In case such funds have not been secured yet, please indicate how you intend to cover the necessary costs for the residency

Please send your filled application together with the scans of the ID Cards or Passports of the practitioners mentioned in this application AND any documentation that will strengthen your application to ippartecipa@vca.gov.mt

By submitting this application, I confirm that I have read the InnovAIR 2023 @ the VDC call and that I accept the conditions and process stipulated in this same document on behalf of myself as the Applicant and/or the entity I represent as declared in this application.