

DECYP Languages Grant Application for 2025

Form Preview

Applying for a Languages Grant

* indicates a required field

Applicants please note:

Before completing this Expression of Interest form, please read the Languages Grant Guidelines: [Languages Grant Guidelines for 2025](#).

If you have any questions regarding the Languages Grant Program, please contact curriculum@decyp.tas.gov.au.

Confirmation of Eligibility

By selecting 'yes' below, you are confirming that:

- you are submitting an application for a Languages Grant for a Tasmanian government school, and
- the application has the approval of the school Principal.

Please select below: *

☐ Yes

☐ No

Contact Details

* indicates a required field

Applicant Details

School name *

Use this field only if relevant.

Principal's Name *

Title

First Name

Last Name

Principal's email address *

Must be an email address.

Contact person for this grant application at your school *

Title

First Name

Last Name

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Contact person's email address *

Must be an email address.

Grant Type

* indicates a required field

Please indicate which type of grant you wish to apply for: *

- ☐ Primary School Grant
- ☐ Secondary School Grant
- ☐ Both

Please choose one grant type.

Primary School Languages Grants

* indicates a required field

Which language(s) do you intend to teach at your school? *

- ☐ Auslan
- ☐ Chinese
- ☐ French
- ☐ German
- ☐ Indonesian
- ☐ Italian
- ☐ Japanese

Language program will align with Australian Curriculum Language v9

- ☐ Yes
- ☐ No

Did your school receive a Languages Grant for the 2024 school year? *

- ☐ Yes
- ☐ No

Please list the names of your Language(s) teacher(s) *

It is recommended that Language(s) teacher(s) be included in the decision to apply for this grant. If you do not have a Languages teacher, please record as 'not yet confirmed'.

Program objectives *

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Briefly outline the main objectives of the program.

Program details *

Provide details of the Language(s) program.

Intended outcomes of the program *

Briefly outline intended outcomes of the program.

Secondary School Languages Grants

* indicates a required field

Which language(s) do you intend to teach at your school? *

- ☐ Auslan
- ☐ Chinese
- ☐ French
- ☐ German
- ☐ Indonesian
- ☐ Italian
- ☐ Japanese

Will your language program align with Australian Curriculum Languages v9

- ☐ Yes
- ☐ No

Did your schools receive a Languages Grant for the 2024 school year? *

- ☐ Yes
- ☐ No

Please list the names of your Language(s) teacher(s) *

It is recommended that Language(s) teacher(s) be included in the decision to apply for this grant. If you do not have a Languages teacher, please record as 'not yet confirmed'

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List the feeder schools you will be working with. *

Transition objectives *

Briefly outline the main objectives of the program.

Program details *

Briefly outline the main objectives of the program.

Intended outcomes of the program *

Briefly outline intended outcomes of the program.

Thank you

Thank you for your interest in a Languages Grant. Based on the information provided in the previous question, your application cannot be completed.

Please review your response to the previous question if you would like to continue with your application.