### 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: <u>Languages Grant Guidelines for 2024.</u>

If you have any questions regarding the Languages Grants Program, please contact <a href="mailto:curriculum@decyp.tas.gov.au">curriculum@decyp.tas.gov.au</a>.

### 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's Principal.

Please s  ○ Yes	elect below: *		○ No	
Contac	ct Details			
* indicates a required field				
Applica	nt Details			
School n	ame *			
Use this fi	eld only if relevant.			
<b>Principa</b> Title	<b>l's Name *</b> First Name	Last Name		
Principa	l's email addres	65 <b>*</b>		
Must be an	n email address.			
	person for this First Name		n at your school *	
Title	riist ivallie	Last Name		

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  Did your schools receive a Languages Grant for the 2023 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 *
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  Did your schools receive a Languages Grant for the 2023 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'
List the feeder schools you will be working with. *
Transition objectives *

Driefly outline the main chiestives of the program
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.