



Collaboration and Innovation in French Language Teaching

The AFTV invites its members to apply for funding to assist in the development of initiatives and projects, which promote the teaching and/or the learning of French in their school or region. If you are applying for funding for a collaborative project/initiative please complete one form with the details of all teachers/schools involved. Please submit the form to treasurer@aftv.vic.edu.au.

TEACHERS FROM GOVERNMENT SCHOOLS MAY APPLY FOR FUNDING UP TO \$1,000

TEACHERS FROM INDEPENDENT SCHOOLS MAY APPLY FOR FUNDING UP TO \$500

You will receive a response within 10 working days of receipt of application, **unless** the application is for an activity taking place in the following school year. In these cases you may not receive a response until the new school year. Your AFTV membership for the new school year will also need to be confirmed, before an application will be approved.

PLEASE NOTE: AFTV members who teach in metropolitan and non-metropolitan **GOVERNMENT SCHOOLS** can apply for funding to cover CRT and/or travel costs. Please complete no 12 on the following page.

Funding applications involving cooperation and collaboration across schools and French language programs will be considered favorably. Examples of possible projects to be shared through the AFTV website or at an AFTV PL:

- Development of themed projects/units by primary school groups/clusters/networks
- CLIL unit and authentic resource development
- Shared school incursions
- Creation of detailed study units/resources
- Production of an ICT resource
- Development of a collaborative primary to secondary language transition program

PLEASE NOTE THE FOLLOWING IMPORTANT INFORMATION

- ✓ To qualify for this subsidy you must be a 2022 AFTV member.
 - ✓ Funds will be transferred upon confirmation of your 2022 AFTV membership.
 - ✓ Priority will be given to activities which the AFTV Committee feels will have the greatest learning benefits for the greatest number of students.
 - ✓ Subsidies and grants cannot be used retrospectively. They can only be used for proposed activities/events in the future, which could not take place without the subsidy.
 - ✓ Teachers who receive a subsidy understand that the details of the application will be:
 - Included in the AFTV financial report
 - Discussed at the AFTV AGM
 - Included in the AFTV report to DET
 - Placed on the AFTV website – www.aftv.vic.edu.au
- ... and that supporting documentation will be required, eg certificate of attainment or attendance, invoices etc.
- ✓ The AFTV's decision is final and no further correspondence will be entered into.



TEACHER FUNDING REQUEST FORM 2022

1. Name of school(s)

2. Name of applicant (s)

3. Contact phone (mobile if possible) _____

4. Email address _____

5. This is a government/ non-government/ metropolitan/ non-metropolitan school.

6. What Professional Learning (PL) activity or program are you planning to attend?

7. How will your students benefit directly from this PL or program?

8. What costs will you incur? Please itemise transport/venue hire/booking fees, if any, as far as they can be determined.

9. What is the total amount you are requesting from the AFTV? _____

10. What funding, if any, do you have from other sources?

11. Can you provide a teaching resource/idea inspired by this activity, which could be published on the AFTV website, or shared at an AFTV PL?

If so, please email your resource to: info@aftv.vic.edu.au.

Yes No

12. I am applying for funding to cover:

½ day CRT/1 full day CRT to attend the following AFTV activity _____

½ day CRT/1 full day CRT to attend a PL organised by _____

(Kindly attach relevant flyer/proof of enrolment)

Travel costs to the amount of \$_____ (receipts included)



TEACHER FUNDING REQUEST FORM 2022

I understand that:

- I will need to supply the AFTV with supporting documentation, ie certificate of attainment/attendance, receipts etc.
- I must use the following subsidy acknowledgement statement in any published, printed or online materials associated with the activity:

Name of the activity _____

Signature of applicant _____

The following is to be completed by the school Principal/s or Professional Learning Coordinator/s:

School Name _____
In signing below I, _____ am endorsing _____
(Insert name of applicant)'s application for an AFTV subsidy
Signature _____ Date _____

*In order for the AFTV to process applications, please email your completed form to treasurer@aftv.vic.edu.au
All applicants will be advised of outcome via email.*

If this application is successful, the funds will be transferred electronically (EFT) to the school's nominated bank account.	
<i>Please provide banking details below:</i>	
Name of Bank	_____
Name of Account	_____
BSB Number	_____
Account Number	_____
Bursar contact name/number	_____

The AFTV wishes to celebrate and share the collaboration and work created by its members