

**Teaching Materials Grants 2021**

**Form A (Application Form)**

This is a restricted Word document. Please type your responses.

[ ]  Establishing New Program [ ]  Expanding Existing Program

**Details of applicant (Institution)**

|  |  |
| --- | --- |
| School name |       |
| Postal address |       |
| Suburb |       |
| State / Territory |       |
| Postcode |       |
| Principal’s name |       |
| Phone |       |
| Sector | [ ]  Government [ ]  Catholic [ ]  Independent |
| Level | [ ]  Primary [ ]  Junior secondary [ ]  Senior secondary |

**Details of authorised official (teacher in charge of application)**

|  |  |
| --- | --- |
| Name |       |
| Position |       |
| Work email |       |
| Mobile |       |

**Japanese program details**

|  |  |
| --- | --- |
| Number of students at the school |       |
| Number of students taking Japanese |       |
| Number of Japanese classes  |       |
| Total hours of Japanese taught in a week |       |

Has the school applied for a grant from The Japan Foundation, Sydney (JPF Sydney) in the past?

If so, provide details below (including which grants and when).

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|       |

Introduce your school and its community (max. 100 words).

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|       |

Describe your Japanese language education program, including its current and future goals (max. 100 words).

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|       |

Explain how you intend to use the requested materials provide by this grant in your program. (max. 140 words).

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|       |

**Application checklist**

[ ]  I have chosen the correct grant.

[ ]  I understand and agree to the conditions outlined in the Application Guidelines.

[ ]  I have made a copy of all application documents for my own records.

[ ]  I am sending the following items below by the deadline to coordinators@jpf.org.au.

1. Completed Form A (Application Form)
2. Material List

Note: Successful applicants will be requested to post an original copy of Form A (with original signatures) at a later date as per the requirement set by The Japan Foundation Head Office.

|  |  |
| --- | --- |
| **Authorised Official** **(Teacher in charge of application)** | **School Representative****(e.g. Principal, Head of Department)** |
| Name |       | Name |       |
| School name |       | School name |       |
| Position |       | Position |       |
| Signature |       | Signature |       |
| Date |       | Date |       |