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**APPLICATION FOR CULTURAL INCLUSION SUPPORT FOR VICTORIAN KINDERGARTENS**

[The Department of Education and Training](http://www.education.vic.gov.au/childhood/providers/support/Pages/supportorg.aspx) (the Department) contracts FKA Children’s Services (*fka*CS) to support children and families of culturally and linguistically diverse (CALD) backgrounds attending state-funded Victorian kindergarten programs to best engage with the educational program.

The Department has recently broadened the way it provides support to kindergartens to ensure it responds to the unique circumstances of each service and targets CALD children and families with the highest needs. The purpose of the program is to provide a broad range of support to Victorian early childhood education and care services to support children and their families from CALD backgrounds to engage in the educational program.

Eligible state-funded Victorian kindergarten services can apply for support by completing this application form and submitting it to *fka*CS.

*Fka*CS will work with your service in developing an approach that meets your needs and may include:

* Professional development and learning
* Access to resources
* Cultural capacity building, curriculum and English as an Additional Language (EAL) support and advice – offered by phone, email and/or referral to in-service professional development
* Onsite Language Support with a Bilingual Worker (subject to eligibility)

The priority for onsite Language Support will be given to:

* Refugee/humanitarian entrants
* Children who are eligible for the kindergarten fee subsidy (KFS) or early start kindergarten (ESK)
* Children of parents/carers who speak limited or no English
* Kindergartens that do not have access to staff who speak the child’s language, either from within the service or from the early years management service, local government or other community service
* Services who have limited experience teaching children from non-English speaking backgrounds

**Note:** Applications do not need to meet all of the criteria to be eligible for onsite Language Support as part of the Cultural Inclusion Support Program. Applications will be prioritised where services are ineligible for the Australian Government’s Inclusion Support Programme.

**To access support:** State-funded Victorian kindergartens seeking assistance must complete this application form. Please enter ‘Cultural Inclusion Support Application’ in the subject line of your email, attach the completed application and send to biculturalsupport@fka.org.au

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| ***fka*CS can support you to complete this form** Please do not hesitate to contact *fka*CS via 03 9428 4471 or email biculturalsupport@fka.org.au  |
| 1. **SERVICE DETAILS**
 |
| **Service Name:** |  |
| **Service Provider Name:** |  |
| **Service Number:** |  |
| **Service Address:** |  |
| **Suburb:** |  | **Postcode:** |  |
| **Local Government Area** |  |
| **Date of Application:** |  |
| **Service Type:** | [ ]  Standalone community-based sessional Kindergarten[ ]  Kindergarten managed and operated by Local Government* Local Government Representative:
* Phone:
* Email:

[ ]  Kindergarten managed by an Early Years Manager (EYM)* EYM Representative:
* Phone:
* Email:

[ ]  Kindergarten program delivered in Long Day Care service[ ]  Other (Please Specify): |
| **Name of Educational Leader or person making this application:** |  |
| **Position:** |  |
| **Phone:** |  |
| **Email:** ***Please note: fkaCS will use this email address to communicate with you regarding the outcome of your application and/or support provision*** |  |
| **Availability for phone contact:**  |  |
| 1. **YOUR EXPERIENCE WITH CALD CHILDREN AND FAMILIES**
 |
| 1. **How many children in your service speak a language other than English at home?**
 |  |
| 1. **How many children participate in your service who are emerging English learners**

**(Emerging English Learner: A child learning and communicating through two languages)**  |  |
| 1. **In what ways do the Teachers and Educators in your service engage with and support children and families from CALD backgrounds?**
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| 1. **What experience have you had teaching children who speak this particular language?**
 |  |
| **If this application is for more than 1 child, please complete sections 3, 4 and 5 for each child** |
| 1. **CHILD DETAILS**
 |
| 1. **Date child commenced at your service:**
 |  |
| 1. **Days/time child is enrolled in kindergarten:**
 |  |
| 1. **Language(s) spoken:**
 |  |
| 1. **How many children in your program speak this language?**
 |  |
| 1. **Do you have any staff in your service who speak this language?**
 | [ ] Yes[ ] No *If yes, is this colleague available to support the child?*  |
| 1. **Is this child eligible for Kindergarten Fee Subsidy (KFS) or Early Start Kindergarten (ESK)?**
 | **KFS:** [ ] Yes[ ] No **ESK:** [ ] Yes[ ] No *If you are unsure, please contact your enrolments officer/manager to clarify prior to submitting your application* |
| 1. **How would you describe the connections the child has made with their peers and their Educators/Teachers?**
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| 1. **CHILD AND FAMILY DETAILS**
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| 1. **From your understanding what is the level of English of the parents/carers of this child?**
 | [ ] Fluent[ ] Communicates effectively[ ] Understands English but speaks little English[ ] Cannot comprehend or speak English[ ] Unsure |
| 1. **Is the family of a refugee background?**
 | [ ] Yes[ ] No[ ] Don’t Know |
| 1. **What is your understanding of the child’s ability in their home language?**
 | [ ] Fluent[ ] Communicates effectively[ ] Understands home language but speaks little [ ] Cannot comprehend or speak Home Language[ ] Unsure |
| 1. **Do you or the parents/carers have any concerns about the child’s home language ability/development?**
 | [ ] Yes[ ] No*If yes, please describe current concerns.* |
| 1. **Do you or the parents/carers have any concerns regarding the child’s learning and/or development?**
 | [ ] Yes[ ] No*If yes, please describe current concerns.* |
| 1. **STEPS TAKEN TO SUPPORT THIS CHILD**
 |
| 1. **What are the strategies and resources you have put into action to support the child and family?**

**(E.g. pedagogy and practice strategies, professional learning, resources, connections to local community, relationships with families)** | *Briefly describe the actions you have taken to support the child and family’s connection to and participation in the program:* |
| 1. **Have you used the Victorian Interpreting and Translating Service (VITS) to effectively engage with the parents/carers of this child?**
 | [ ] Yes[ ] No |
| 1. **Have you contacted the Preschool Field Officer regarding this child?**
 | [ ] Yes[ ] No*If yes, what strategies and supports have been discussed and implemented?*  |
| 1. **What other support networks (community services) have you contacted to support the child and family?**
 | *E.g. Settlement service, local community groups*Do you need support in identifying these support networks? [ ] Yes[ ] No  |
| 1. **For kindergartens that are part of Early Years Management or operated by a Local Council:**
 | Have you requested assistance from your EYM or Council?[ ] Yes[ ] No *If Yes, what was the outcome?*   |
| 1. **CULTURAL INCLUSION SUPPORT**
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| 1. **What type(s) of additional support do you think would be most effective in supporting the active engagement of this child and family in your educational program?**
 |  |
| 1. **What type(s) of additional support do you think would be most effective in supporting your practice and pedagogy in supporting children and families from CALD backgrounds?**
 |  |

**To submit: Please enter ‘Cultural Inclusion Support Application’ in the subject line of your email, attach the completed application form and send to** **biculturalsupport@fka.org.au**

*Thank you for taking the time to complete this application. An fkaCS consultant will be in touch to discuss your application. Please allow up to 5 business days for your application to be reviewed.*