## VCAL Teachers Scholarship Program

## Graduate Certificate of Applied Learning and Teaching

## Application Form

First Name

Last Name

Employee Number

Mobile Phone

Email Address

VIT Registration Number

School Name

School Number

Please indicate what VCAL programs you are currently delivering in your school. If you are not currently delivering VCAL programs in your school, please state what VCAL programs you are hoping to deliver.

Teaching in an applied learning environment where students can thrive is an exciting undertaking. Please answer the following questions.

1. What are you hoping to learn from this Graduate Certificate of Applied Learning and Teaching? (Approximately 100 words)

1. How will you use this Graduate Certificate to create interesting learning programs for your students? (Approximately 100 words)

## Teacher Commitment

I have reviewed the Application Guidelines to participate in Deakin University’s Graduate Certificate of Applied Learning and Teaching. I understand and am completely aware of the study required to successfully complete this program. I am committed to this study; I am confident that it will build my knowledge and skills in applied learning and that this will surely benefit the learning environment and programs for the students in my care.

Signed:

Name (printed):

Dated: / / 2021

## Principal Support

I approve the application of to participate in Deakin University’s Graduate Certificate of Applied Learning and Teaching. I acknowledge that there will be study requirements related to the completion of this program and I will provide support when needed for this applicant throughout the course of their study. In my view this teacher has the commitment, skills and aptitude to undertake this Graduate Certificate program.

I acknowledge that there are four Casual Relief Teacher (CRT) days available for this teacher to undertake studies directly related to the responsibilities of this Graduate Certificate program.

Signed:

Principal Name (printed):

Dated: / / 2021