

Teach and Learn Scholarship (Specialist Teaching Areas)

Application form for appointed teachers

SCHOLARSHIP APPLICANT DETAILS

Title: **First Name:** **Middle Name:** **Last Name:**

Date of Birth: **DoE Employee ID:**

An Aboriginal person or a Torres Strait Islander is a person of Aboriginal descent or Torres Strait Islander descent who identifies as such and is accepted as such by the community in which he or she lives.

Are you an Aboriginal person or a Torres Strait Islander as defined above?

Address: **Suburb:** **State:** **Post Code:**

Email Address: **Contact Phone Number:**

SCHOLARSHIP SUBJECT

Please indicate the specialist teaching subject you are seeking a scholarship for:

Careers Adviser:

I have been recommended for a permanent careers adviser position (minimum 0.6 FTE) following merit selection and completion of an approved postgraduate qualification in career education.

English as an Additional Language or Dialect (EAL/D):

I have been recommended for a permanent EAL/D position (minimum 0.6 FTE) following merit selection and completion of an approved postgraduate qualification in EAL/D or TESOL.

Teacher Librarian:

I have been recommended for a permanent teacher librarian (minimum 0.6 FTE) position following merit selection and completion of an approved postgraduate qualification in teacher librarianship.

EMPLOYMENT DETAILS

Please provide the name of the school where you are appointed to as a specialist teacher, or have been recommended for appointment to, following a merit selection process:

Please provide the commencement date of your appointment to the specialist teaching role:

Please indicate your approved mainstream teaching area:

primary

secondary

primary and secondary

Please indicate the subjects you are approved to teach (approved subjects are those which you have been accredited to teach by the Department or NESAs. If you are a primary teacher, indicate primary):

POST-GRADUATE STUDIES

Please indicate which applies to you:

I am currently enrolled in a postgraduate qualification

I will be enrolling in a postgraduate qualification next semester

Please provide details of the postgraduate qualification you are enrolled in or intending on enrolling in:

Name of university:

Name of postgraduate qualification:

Please indicate the total duration of study remaining from next semester:

6 months

1 year

1.5 years

2 years

Please provide details of the agreed timeframe for you to complete your postgraduate qualification as per your conditions of employment:

I will be completing my studies by (e.g. End of Term 4, 2026):

APPLICANT'S SUPPORTING STATEMENT

Please outline your motivations for wanting to become a specialist teacher in your selected subject area (Approximately 1/2 A4 page):

Please state why you believe you are both professionally and personally suitable for a scholarship to retrain in your selected specialist teaching area (Approximately 1/2 A4 page):

STATEMENT OF UNDERSTANDING

I understand the following:

I will be obliged to execute a formal Scholarship Agreement which outlines my obligations and the department's obligations under the scholarship.

I am committed to satisfactorily completing the study requirements within the required study duration period, as specified in my Scholarship Agreement and in line with my conditions of employment.

I understand that following the successful completion of my studies, I agree to remain in the school where I am currently appointed, in a permanent capacity, for a minimum period of three years to complete the Service Commitment Period in line with my Scholarship Agreement.

I understand that scholarship payments are paid to me directly and will be taxed accordingly.

I certify that the information I have provided on this form is accurate and complete. In applying, I acknowledge that personal information about me will be provided to the NSW Department of Education and that in the interest of proper and prudent management of its scholarship program, the NSW Department of Education may liaise with and share information about me with other education authorities in both the public and private sectors.

I, _____ understand and agree to the Statement of Understanding as outlined above.
(first and last name)

Signature:

Date:

APPLICATION CHECKLIST

All supporting documents are to be electronically scanned (as a PDF) and titled. Please ensure you provide the following supporting documents with your completed application:

A photo identity card issued by the Australian Government or a state or territory government (this may take the form of a government issued occupational licence or driver's licence) to verify your identity.

An application for enrolment into a postgraduate program or evidence of successful enrolment.

Official transcripts of results of any postgraduate studies already completed in the specialist teaching area (if applicable).

Email your completed application and supporting documents to: sponsoredtraining@det.nsw.edu.au

This is a digital form. Non-digital applications will not be accepted.