

Before you begin

Before registering an Expression of Interest (EOI), ensure that you have read the <u>Program Guidelines</u> and the information for <u>new schools</u> and <u>setting</u> <u>up a language school</u> on the Community Languages Schools Program website. It is very important to have all the correct details and documents available **before** you start. The online registration process does not allow you to stop and save along the way. If any of the required information is not available, you will need to restart your submission from the beginning.

Prepare your registration and gather required documents

Please have the required documentation available before starting your registration:

- Constitution
- Certificate of Incorporation from the Department of Fair Trading
- ABN/GST Registration
- Public Liability Insurance Certificate
- Workers Compensation Insurance Certificate, Exemption letter from lawyer or accountant, or Statutory Declaration
- Bank Details on the Organisation Letter Head
- Teaching Program

Documents must be in one of the following file types; jpg, jpeg, png, doc, docx, pdf.

File name should be limited to **30** characters and include the **name of the document** and the **year** e.g., Public Liability Insurance 2024

All fields marked with a **red asterisk (*)** are mandatory and must be completed. This applies throughout the portal.

It is best to use Google Chrome when accessing the portal.



User guide

| 1. Go to the <u>Community Languages Schoo</u> <u>portal page</u> and click the blue link Expr Interest . | | NSW Clobed and the following for the following f | terrestor it server Community Languages Schools Program Porta Welcome to the Online Registration System for the Community Lang to access your entity access, the the Lynnake of Interest the to register your Organization lowing applications are open now: | Lages Schools Program details. | |
|---|-----------------------|---|---|-----------------------------------|---|
| 2. Review the documents required and ensistence on your device before starting the Interest process.Click Next to proceed. | - | | <section-header> Vert tetrated Characteristic tetrated</section-header> | comparer and ready to upload. | |
| 3. Organisation Details (ABN Validation) | | | | | |
| Enter the Organisation Name and the A Business Number (ABN). | ustralian | Organisation Details (ABN | N Validation) | | |
| The organisation name must exactly ma listed on the <u>Australian Business Regist</u> | | * Organisation Name | | | |
| Do not include any spaces in the ABN fi | əld. | * Australian Business Number (ABN) 🕚 |) | | |
| Note: You may see an error message an to proceed if: | d won't be able | Cancel | | Previous Next | - |
| the Organisation is already registered program the Organisation has already submit which is under review and has not yeapproved or rejected the Organisation name does not mat registered ABN | ted an EOI et been | | | | |

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| an invalid ABN is entered | | | |
|---|--|--|-----------|
| the ABN is not associated with the organisation name | | | |
| • spaces are entered into the ABN field. | | | |
| Click Next to proceed. | | | |
| Organisation Details | Expre | ession of Interest - Registration F | Page |
| Complete required fields. | Organisation Details | | |
| | Incorporation Number | *What type of legal status does the incorporated organis | |
| Note: The GST Registered checkbox will be | Year of Registration | * Date of Establishment of Organisation | • |
| automatically ticked if the validated ABN is GST | | | 11 |
| registered. | * Public Liability Insurance Policy Number | * Public Liability Insurance Policy Expiry Date | ii ii |
| | Worker's Compensation Insurance Number | Worker's Compensation Insurance Expiry Date | |
| Use the calendar icon to select the correct date | ◆Language | | |
| formatting. | Website | | v |
| If the following statements are true, tick the checkboxes to agree: | is the school's principal aim the teaching of languages? This does not include Englis | h language. | |
| Is the school's principal aim the teaching of language | Does this school show close links with a community whose first/heritage language l Street Address | is NOT English? ✓ Postal Address | |
| Does the school show close links with a | * Address 1 | Address1 | |
| | | | |
| community whose first/heritage language is NOT English? | Address2 | Address2 | |
| | * Cityi/Suburb | City/Suburb | |
| | | | |
| nter the Street and Postal addresses. | *State *Postcode | State | Postcode |
| | *Sane *Postcode NSW V | State NSW | Postcode |
| | | | |
| Enter the Street and Postal addresses. Select the State Electorate from the drop-down list. Click Next to proceed. | NSW | | |



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| 5. | Key Organisation Contacts | | | | | |
|----|---|--|--|-------------------|---------------|--|
| | Enter contact details under Head of Organisation , Coordinator of Language Program and Public Officer . | Key Organisation Contacts Please note that if this Expression of Interest is approved, a user account will be created for the person listed as Head of Organisation. | | | | |
| | Important: These three contacts must not be the same person. | Head of Organisation | dentials at the email address listed for this person | | | |
| | The Head of Organisation will be the licence holder and receive the portal login details to complete grant applications. | * First Name * Position | ▼ | *Last Name *Email | | |
| | Click Next to proceed. | Contact Phone | | * Mobile Phone | | |
| | Note: An error message will appear if: | | | | | |
| | duplicate emails or phone numbers are provided for the contacts duplicate names are provided for the contacts. | | | | | |
| 6. | Organisation Bank Details | | Organisation Bank Details | | | |
| | Complete required fields. | | * Bank Name | | | |
| | Click Next to proceed. | * Bank Account Name | | | | |
| | | | * Bank Account Number * Bank Address | *E | 35B | |
| | | | | | | |
| | | | Cancel | | Previous Next | |



7. Community Language School Location Information

Enter **Community Language School Location Details**. Enter your school name and date established in the first two fields.

In the **Location Search** text field start typing the first few letters of the location name and then click in the **Location** field to select the correct location name from the drop-down list.

To search for official school names, use the <u>NSW</u> <u>Public School Finder</u> or the <u>NESA list of registered</u> <u>non-government schools</u>.

Note: If a location cannot be found in the drop-down list, click **Add** on the top of the page to provide location details.

Once location details are added they cannot be deleted.

The Community Languages Schools Program will need to approve new locations that are not found in the drop-down list. Please contact the Program on commlang@det.nsw.du.au.

| | Add |
|---|-----|
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| | a |
| | 8 |



| 8. Community Language School Location Co Person | ontact | Community Language School Location Contact Person | | | | |
|--|-------------------------------|---|-----------------------------|---------------|---------------|---|
| reison | | Mr James Brooks | | | | |
| Tick the checkbox to confirm the correct of person and add the address details. | contact | Mrs Susan Sontag | | | | |
| Review the contact details to check that a date and correct. Make any required edits. | - | Dr Alvin Apple Enall avving-i-travkLook Mobie Poine 641788888 | Cantact Phone 6437000000 | | | |
| If the contact person is not listed, click Cro Contact for Community Language School | | Create New Contact for Community Language School Location Vou need to provide additional Contact Details (address) for Community Language School Location Contact Person *Address | | | | |
| | | Fron Address is required. * Cigr/Suburb | *Some | * Possal Code | | |
| 9. Create New Contact for Community Lang Location | guage School + Create Ivew Co | ntact for Community Language School Location | | | | |
| Tick if the School Location Contact Perso shared with the public? checkbox. | n details be | | * | * Last Narra | | |
| Click Next to proceed. | * Email * Mobile Strane | | | Contact Phone | | |
| Note: You cannot delete an entry once it h created. If there is an error, you will need t | | | | | | |
| EOI process from the beginning. | * Og/Suburb | | *Scare NSW | * | * Postal Code | 1 |
| | Can the School | Can the School Location Contact Person details be shared with the public? | | | | |
| | | | | | | |



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| 10. School Location Schedule Complete Class Details Enter Start and End Dates for the whole year (using the calendar icon) Number of Classrooms Number of Weeks in each term Complete Class Schedule Enter the Start and End Times for all days that classes operate on for that location. Class times should be outside of regular school hours. Comments/Notes – provide further information if relevant. | Scholl Castion Schedule |
|--|---|
| 11. Required Documents | Upload the Required Documents These file types are compatible for upload; jpg, jpg, doc, door, pdf. |
| Upload Required Documents by clicking the Upload files button and selecting the file from your device or by dragging and dropping the file to the drop files field. | Document Type *Upload Files Output Upload Files Document Type *Upload Files |
| You can upload more than one file to each document type. | Document Type Public Labing insurance Policy Uplead Files Or drop files |
| Click Next to proceed. | Document Type • Upload File Syllabus on Teaching Program ① Upload Files |
| Note: You won't be able to proceed if a file has not been uploaded to each document type field. | Document Type + Lipoad File Bank Details ① Upload File Document Type + Lipoad File Winners Compensation Insurance Policy or Exemption Letter ① Upload File |
| You can only upload these file types: jpg, jpeg, png, doc, docx, pdf. You can upload multiple files. | Cancel Previous Nex |

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| If you wish to remove a document that you have uploaded incorrectly, please contact the Community Languages Schools Program. | |
|--|--|
| 12. Certification Review the Certification statements. Tick the I confirm that I have read and understood the above declarations/statements checkbox. Complete the Details of Person Submitting this Expression of Interest. | Certification I declare that the information in this Expression of Interest. I declare that the information agrees to this Expression of Interest. I declare that the Head of the Organisation agrees to this Expression of Interest. I confirm that I have read and understood the above declarationxistatements ✓ Details of Person Submitting this Expression of Interest: *Title * First Name • Last Name • Last Name • Pastion * Nation |
| Click Submit to proceed. | *Email Cancel Previous Submit |
| 13. Once the Expression of Interest has been successfully submitted, a Thank you for submitting your Expression of Interest message will display. Note: The outcome of the EOI application will be emailed to the Head of Organisation. If approved, login details for the portal will also be sent to the Head of Organisation's email address. If the Head of Organisation would like to assign their licence to another member of the organisation, they can do so by emailing commlang@det.nsw.edu.au. | Home Completed The action Submit Application has completed. |