ACU Teaching Development Grant 2024

Application Form

Context

Please refer to the Teaching Development Grant Guidelines before you complete this application form. The guidelines contain important and relevant information to assist you with your application.

The closing date for TDG applications is Mon**day 19th August 2024. Applications are to be submitted as one PDF document to** **CEI@acu.edu.au****.**

The completed application has the following sections:

1. This *Application Form* which requires the Head of School approval, the signed project team signatures and other relevant information.
2. *Project Proposal* (max 4 pages, 2.0 cm margins, Calibri font 11 point)
3. *TDG Budget* (one page) Excel Template sheet

**Please combine the 3 sections and submit as one PDF document**. Further advice can be sought from the Awards and Grants Team, Centre for Education and Innovation at CEI@acu.edu.au.

**Funding**

Funding for Teaching Development Grants will be considered for large scale projects that can demonstrate potential for broad and substantial impact to the learning and teaching enterprise across ACU. Funding is available each year for ACU Teaching Development Grants, with no individual grant to receive more than $13,000. While there is no minimum amount, applicants should note the expectation that the grant will be sufficiently robust to have a potential organisation-wide impact.

Priority Areas

**Indicate which priority area your application addresses:**

[ ]  Broadening access and participation by offering flexible learning options and student choice

[ ]  Developing discipline competence and extending this through work integrated learning experiences

[ ]  Partnering with students, industry and community to co-develop curricula that are fit for purpose and prepare students for future employment opportunities

[ ]  Fostering opportunities for transdisciplinary, interdisciplinary and cross-disciplinary approaches to enable students to make a difference

[ ]  Embedding Aboriginal and Torres Strait Islander Knowings in curricula to prepare students to work interculturally and with respect and competence

[ ]  Assessing with authentic tasks that are aligned to practice and skills in the real world

[ ]  Providing a responsive digital learning ecosystem that includes appropriate tools

[ ]  Embedding research and scholarship in curricula to ensure evidence-based teaching and learning

Project Title and Project Leader

|  |  |
| --- | --- |
| Project Title: | Click here to enter Project Title |
| Project Leader: | Click here to enter Project Leader |
| Project Leader Contact Details: Title, Position, Phone, Email, Campus | Click here to enter Project Leader Contact Details |
| Relevant Experience: | Click here to enter Project Leader Experience |

Previous Teaching Development Grants

Please list previously funded Teaching Development Grants (CEI, ACU and Faculty)

|  |  |  |  |
| --- | --- | --- | --- |
| **Name of Project** | **Year Awarded**  | **Final Report Submitted Y/N** | **Did this project require an extension Y/N** |
| **Click here to enter Project Title 1** |  | Choose an item | Choose an item. |
| **Click here to enter Project Title 2** |  | Choose an item | Choose an item |

Project Team Members

|  |  |
| --- | --- |
| List Team Members and Contact Details:  | Click here to enter team members’ details |
| Relevant Experience | Click here to enter brief description of relevant experience for each team member |

In-kind Support (CEI)

Advice and guidance is available for up to 10 hours in total. Please choose from the three areas.

|  |
| --- |
| Learning Experience Design |[ ]
| Developing an Ethics application |[ ]
| Project Evaluation |[ ]

Head of School Statement of Support for Project Leader and Project

|  |
| --- |
| **Name and Title of Head of School or Director** |
| The applicant has discussed this application with me | Yes | [ ]  | No |[ ]
| I support this application | Yes |[ ]  No |[ ]
| Head of School (of Project Leader) please provide a statement of support for the project. |
| Click here to add statement of support |
| **(HOS) Signature:** | **Date:** |

Supervisor Support for Project Team Members

|  |  |
| --- | --- |
| **Team Member(s)** | **Supervisor(s)** |
| 1 | Name:Signature: | Name:Signature: |
| 2 | Name:Signature: | Name:Signature: |
| 3 | Name:Signature: | Name:Signature: |
| 4 | Name:Signature: | Name:Signature: |