



AUSTRALIAN SCHOLARSHIPS GROUP
Supporting Children's Education

PROFESSIONAL DEVELOPMENT GRANT APPLICATION
(for *You Can Do It!* Education Training)

Name of School: _____

Address: _____

_____ State _____ P/code _____

Phone: _____ Fax: _____ E-mail: _____

Principal: _____ Contact Person: _____

Number of Staff: _____ Number of Students: _____ Grades: _____

Type of School: Government Private Independent

I/We would like to apply for an ASG Professional Development Grant for *You Can Do It!* Education Training on behalf of my/our School for the following reasons. (Please attach if insufficient space)

Have any members of your Staff attended previous *You Can Do It!* Education Seminars or Workshops?

Yes No

If Yes , please indicate who and the Seminar or Workshop attended.

