## Nomination to participate in Program Amplify.

Schools are free to submit more than one nomination but please submit each on separate nomination forms.

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| --- |
| Contact Information |
| **School:** |  |
| **Name:** |  |
| **Email address:** |  |
| **TQI Number** |  |
| **Years Teaching**  |  |
| **Year Level** |  |
| **School Phone**  |  | **Mobile:** |  |
| **Invoice to be sent to:** |  |
| **Program Amplify Commitment** |
| **Session 1: Face-to-Face*** Term 1, Tuesday 14 February, 9.00am-3:30pm

**Session 2: Online*** Term 2, Wednesday 24 May

**Session 3: Online*** Term 3, Wednesday 16 August

**Session 4: Online*** Term 4, Wednesday 18 October

**Session 5: Face-to-Face Celebrating Teaching & Learning Event*** Term 4, Thursday 8 November 4pm-6pm
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| Further Information |
| **Nominees signature:** |  | **Date:** |
| **Principal (or delegate’s) signature:** |  | **Date:** |