**Project Proposal Form: Pacific TVET Projects**

* Questions related to the Project Proposal can be sent to COL until October 15, 2021 at the email ID pacificpartnership@col.org with the subject line ‘Pacific TVET Projects Questions’
* All Proposals must be received by 0800 hours PDT (North America) October 20, 2021.
* This Project Proposal Form must be **emailed** to: pacificpartnership@col.org with the subject line ‘Pacific TVET Projects Proposal’ to:

Attention: ODFL Partnership Project

Commonwealth of Learning

4710 Kingsway, Suite 2500 Burnaby, BC V5H 4M2, CANADA

Tel: +1.604.775.8200

Please complete this Project Proposal Form and return it.

**Note:** No additional information is required at this stage.

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| 1. **Contact details**
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| Name of institution |       |
| Lead contact person | Name |       |
| Email |       | Phone |       |
| Alternate contact person | Name |       |
| Email |       | Phone |       |

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| 1. **Tell us about TVET in your institution**
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| What TVET courses or programmes do you currently offer students? |       |
| What has your institution done in the last 12 months to improve or develop its TVET teaching and learning? |       |

| 1. **Tell us about your project**
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| Which of the following areas will your project focus on?*Tick all that apply* | Developing or improving standards-based programmes | [ ]  | Developing or improving competency-based assessment | [ ]  |
| Developing or improving online learning resources | [ ]  | Providing professional development opportunities for staff | [ ]  |
| Developing or improving relationships with industry | [ ]  | Promoting TVET as a valid pathway for learners | [ ]  |
| For each of the focus areas identified above, briefly describe what you want your project to achieve. |       |
| How will this project contribute to: | 1. Improving institutional capacity?
 |       |
| 1. Improving TVET staff capability?
 |       |
| 1. Improving the learning experience and/or outcomes for students?
 |       |
| Which groups of people do you expect to be involved in this project?*Tick all that apply* | TVET Leaders | [ ]  | Students | [ ]  |
| TVET Teachers | [ ]  | Community | [ ]  |
| Employers | [ ]  | Other | [ ]  |
| How will you make sure your project considers the needs of all genders and people with disabilities? |       |
| What actions will you take to make sure the project is successful? |       |
| Briefly describe how any funds for the project will be managed. |       |
| When do you expect the project to start and finish? | Start month and year |       | Finish month and year |       |