

Application Form - Part 1

To apply for the 2020 State Leadership Fellowship Program, please fill out the form below by 6 December 2019 (answers 1 to 3 - minimum 200 words to max 800 words). The State Leadership Fellowship Selection Panel will review applications, provide feedback and select applicants to continue to Part 2 of the 2020 Leadership Fellowship Application process.

* 1. Applicant's details:

Full Name

Position

Workplace

Contact number

(Applicant)

Director , Educational
Leadership

Contact Number *(Director,
Educational Leadership)*

* 2. Capacity to undertake the research study

This should include evidence of:

- leadership impact within the school and beyond the school
- work completed to date in the area of research interest
- experience in research, such as professional learning, school-based action research, submissions
- contributions to professional associations
- academic qualifications.

* 3. **Proposed research study**

This should include:

- topic of the research study
- context of your research study –
Please describe the nature of your research study and explain why you would like to undertake this research study
- a description of the evidence you are using to justify the choice of your study
- a reference to the key literature informing your research study
- key research questions -
State the main three or four questions that the study will investigate.

*** 4. Contribution to knowledge of leadership, importance of research study, capacity to contribute to development of other principals and to share your research**

Describe how the research study will focus on an area of leadership and contribute to the body of knowledge for leaders on an aspect of the [Australian Professional Standard for Principals and the Leadership Profiles](#).

Describe how you intend sharing your research beyond your immediate networks.

*** 5. *Please upload below a written/signed consent (an email would suffice) from your Director Educational Leadership, endorsing your application. This is a requirement for your application to be considered.**

Choose File

No file chosen

*** 6. *Please upload below an applicant signed copy of the [Fellowship conditions](#). This is a requirement for your application to be considered.**

Choose File

No file chosen