



**Australian Government**  
**Department of Education**

PO Box 9880  
Canberra City ACT 2601  
Telephone: 1800 020 212  
TTY: 1800 554 609

Website: [www.education.gov.au/ldcpdp](http://www.education.gov.au/ldcpdp)

Email: [ldcpdp@education.gov.au](mailto:ldcpdp@education.gov.au)

[legal name]

[primary mailing address]

[primary mailing address line 2]

[primary mailing address line 3]

Dear [Name of Authorised Signatory from LDCPDP Application form]

**Outcome of assessment for Funding under the Long Day Care Professional Development Programme**

Following your organisation's ('You', 'Your') application for funding under the Long Day Care Professional Development Programme ('LDCPDP'), I am pleased to advise You that the Department of Education ('We', 'Us', 'Our') can confirm that the service(s) listed in the Applicable Services table on the next page of this letter has (have) been assessed as eligible for the payment type(s) shown against the service name(s).

Following assessment of Your application, We have determined that You are eligible for a total amount of Funding of \$xxxxx under the LDCPDP. This Funding consists of:

1. \$xxxxx (Base Amount) for Contact Staff Professional Development
2. \$xxxxx Early Childhood Teacher Loading
3. \$xxxxx Geographic Isolation Loading

If You wish to accept this Offer of Funding, please complete the following steps:

- (a) go to [www.education.gov.au/LDCPDP](http://www.education.gov.au/LDCPDP) and view and download the latest Guidelines for the Long Day Care Professional Development Programme ('LDCPDP Guidelines') and the Long Day Care Professional Development Programme Funding Agreement ('LDCPDP Funding Agreement');
- (b) read the LDCPDP Guidelines and the LDCPDP Funding Agreement;
- (c) in the 'Acceptance of Offer of Funding' section of this letter:
  - (i.) once You are satisfied with Your understanding of the LDCPDP Guidelines and the terms and conditions set out in the LDCPDP Funding Agreement, check the box titled: **"I have read and understood the LDCPDP Guidelines and the terms and conditions of the LDCPDP Funding Agreement"** by typing the word 'yes'; and
  - (ii.) complete your name, position and date; and
- (d) return an electronic copy OR a hard copy to Us within 30 days of the date of this letter.

Our offer expires 30 days from the date of this letter.

Please note that should You accept Our Offer of Funding, the LDCPDP Funding Agreement expires on 31 December 2017.

If You have any questions about this offer, please contact this office using the details above.

Yours sincerely,

[STAFF DETAILS]

for and on behalf of the Commonwealth of Australia

---

## Acceptance of Offer of Funding

For the service(s) shown in this table:

**Applicable Services table:**

1. Service Name	2. Address	3. Total Payment Amount	4. Base Amount for Contact Staff Professional Development	5. Early Childhood Teacher Loading	6. Geographic Isolation Loading

**Departmental Officer:**

The Departmental Officer who can send and receive Notices on Our behalf is:

[Please insert the name, position and contact details of the Departmental Officer under the Agreement]

**Acceptance of Offer of Funding:**

I wish to accept this Offer of Funding and enter into the LDCPDP Funding Agreement for and on behalf of:

<b>Organisation name:</b>			
<b>ABN:</b>			
<b>I have read and understood the LDCPDP Guidelines and the terms and conditions of the LDCPDP Funding Agreement;</b>  <b>and</b>  <b>I declare that I am authorised to enter into the LDCPDP Funding Agreement on behalf of the Organisation named above and that all the information on this page is true and correct.</b>		<b>YES / NO</b>	
		<b>YES / NO</b>	
<b>Name:</b>			
<b>Position:</b>			
<b>Signature:</b>		<b>Date:</b>	

**By accepting this offer, the Organisation is executing an Agreement with THE COMMONWEALTH OF AUSTRALIA ('Commonwealth') as represented by and acting through the Department of Education.**