

FOR OFFICE USE ONLY

Date Received: _____

Certificate Number: _____

**TESL Canada Federation Professional Certificate Application Form
PROFESSIONAL STANDARD ONE**

GENERAL INFORMATION:		
1	Name of applicant:	
	<i>Last Name</i>	<i>First Name</i>
	Previous name: If applicable	
	<i>Last Name</i>	<i>First Name</i>
2	Name as you wish it to appear on the certificate:	
3	Permanent Address (to which your certificate will be mailed)	
	Home Ph #	Cell Ph #
	Email:	
4	Current Professional Address:	
	Work Ph #	Email:
5	Membership Information Required: Please tick the appropriate box on the left to indicate type of membership. Please tick the appropriate box on the right to provide details of the membership.	
	<input type="checkbox"/> Member of Provincial Affiliate (Please check with your provincial TESL organization to verify if they are currently affiliated with TESL Canada. If they are not at the present time, a direct membership is needed.)	<input type="checkbox"/> Email sent directly from province <input type="checkbox"/> Copy of membership card enclosed <input type="checkbox"/> Official receipt enclosed (includes membership number and date)
	<input type="checkbox"/> TESL Canada Direct Membership	<input type="checkbox"/> Payment receipt enclosed <input type="checkbox"/> Application form enclosed
6	English Language Proficiency Requirement	
	<input type="checkbox"/> Native language speaker	
	<input type="checkbox"/> Non-native language speaker	<input type="checkbox"/> Valid official ELP score enclosed. <input type="checkbox"/> Language of instruction and administration for bachelor's degree was English and completed in a country where English is an official language (for a list of countries exempted from the English proficiency requirement, please refer to the teacher certification manual) <input type="checkbox"/> Officially sealed letter from the University enclosed <input type="checkbox"/> Letter emailed/mailed to TESL Canada directly from the University

IMPORTANT: COMPLETE PAGE 4 CHECKLIST AND INCLUDE PAYMENT and MEMBERSHIP INFORMATION. PLEASE ALLOW 4-6 WEEKS FOR PROCESSING FROM DATE RECEIVED BY TESL CANADA. CERTIFICATION WILL BE DELAYED IF APPLICATION IS NOT COMPLETE.

TESL Canada Federation Professional Certificate Application Form

PROFESSIONAL STANDARD ONE

<p>1. Education <i>(Please tick appropriate selection on right)</i></p> <p>Bachelor degree completed: _____</p> <p>Year completed: _____</p> <p>University: _____</p> <p>Please note: if your degree was completed at a university outside Canada, we must receive an original assessment of Canadian equivalency. We require an original basic, document by document assessment.</p> <p>Canadian Equivalency Report</p> <p>Name of the assessment organization: _____</p>	<p>Official transcripts enclosed (sealed by the university)</p> <p>Official transcript to be sent directly by university</p> <p>Original Canadian equivalency assessment to be sent directly</p> <p>Original Canadian equivalency assessment enclosed (sealed by the institution)</p>
<p>2. TESL/TEFL Training <i>(Please tick appropriate selection on right)</i></p> <p>TESL/ TEFL training institution: _____</p> <p>Contact person: _____</p> <p>Program name: _____</p> <p>Date completed: _____</p> <p><u>PRACTICUM:</u> Please choose appropriate practicum internal or external:</p> <p>1- Internal practicum - Complete this section if you completed your practicum within your TESL Canada recognized program above or at an alternative TESL Canada recognized program. For a list of TESL Canada recognized programs please see: https://tesl.ca/training/tesl-canada-recognized-teacher-training-programs/recognized-teacher-training-directory.html</p> <p>Name of recognized program under which you completed the practicum _____</p> <p>Name and address of institution where practicum was completed: _____</p> <p>Name of Sponsor Teacher: _____</p> <p>Contact information: _____</p> <p>Practicum Supervisor: _____</p> <p>Hours spent observing Sponsor Teacher in the classroom: _____</p> <p>Hours of supervised practice teaching: _____</p>	<p>Official transcripts enclosed (sealed by the institution)</p> <p>Official transcripts to be sent directly by the institution</p> <p>OR</p> <p>Certified Copy of Certificate or Diploma enclosed*</p> <p><i>*Please do not send originals, but have the copy certified by one of the following professionals: "notary public, commissioner of oath, lawyer, senior university/college officer or professor, public school principal, signing officer of a bank, medical doctor, minister of religion, police officer, or the Canadian Embassy or the Consulate (outside Canada)".</i></p>
<p>2- External Practicum - Complete Table 1: External practicum Information if you completed your coursework at a TESL Canada recognized program but your practicum at a non-TESL Canada recognized program. Additional cost of \$100. plus tax</p> <p>Transcript of courses completed or a letter from program stating applicant has successfully completed all required coursework except the practicum</p>	<p>Official document enclosed (sealed by the institution)</p> <p>Official document to be sent directly by the institution.</p>

Table 1: External Practicum Information.

The following can be completed/submitted by the applicant	
1- Location of practicum:	
2- Name of Sponsor Teacher:	
3- Contact information:	
4- Sponsor teacher's qualifications and experience	
5- Practicum Supervisor:	
6- Assignments/tasks required	Enclosed
7- Assessment of tasks	Enclosed
The following documents need to be sent in either officially sealed envelopes or by the institution/writer directly to TESL Canada	
1- Letter from practicum supervisor or program confirming class size, age of students, number of hours observed and number of hours taught.	Official document enclosed (sealed by the institution) Official document to be sent directly by the institution
2- Formal observation report	Official document enclosed (sealed by the institution) Official document to be sent directly by the institution

Note: if you completed your TESL training through a program not listed on the website as a TESL Canada recognized program, then please complete a PLAR application form:

<https://tesl.ca/certification/tesl-canada-professional-certification/plar.html>

Application Form Check List
(Required for ALL Standard Applications)

Enclose the following required documents:

- TESL Canada Standard One application form (including Table 1 only if external practicum)
- Official sealed transcript of university Bachelor's degree
- Canadian Equivalency Report (if applicable)
- English Language Proficiency Score (if applicable)
- Official sealed TESL training transcript or Certified* Photocopy of TESL certificate or Diploma (*not original -signed/notarized as per list on page 2)
- Proof of TESL Canada direct membership (Refer to page 1 #5. Information about membership can be found on the TESL Canada website under certification FAQs and the membership tabs.)
Membership # _____ Membership Expiry Date _____

I certify that the information given on this form and in any documents attached is correct and complete. I also understand that TESL Canada reserves the right to revoke certification in case of any false information.

Name: _____ Date: _____

Signature: _____

Applications by Mail: TESL Canada Federation
PO Box 30001 RPO Prospect Plaza
Fredericton NB E3B 0H8

Applications by Email: admin@teslc.ca

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- Payment of \$94.50 (\$90.00 plus \$4.50 GST) if you live in British Columbia, Alberta, Manitoba, Saskatchewan, Quebec, NWT, Nunavut, and Yukon
or
Payment of \$101.70 in Ontario
or
Payment of \$103.50 in Nova Scotia, New Brunswick, Prince Edward Island and Newfoundland, and Labrador
or
Payment of \$90.00 U.S. if applying from outside Canada
Note: This fee is non-refundable and will be processed upon receipt of application.
Cheques payable to TESL Canada Federation.
 - External Practicum and Non TESL Canada recognized CELTA applicants please include an additional payment of \$100.00 plus tax ((\$105.00 British Columbia, Alberta, Manitoba, Saskatchewan, Quebec, NWT, Nunavut, and Yukon; \$113.00 Ontario; \$115.00 Nova Scotia, New Brunswick, Prince Edward Island and Newfoundland and Labrador).**
 - If paying by VISA or MasterCard, please fill out the information below:
VISA MasterCard
Total Amount to be charged: _____
Name on Card: _____
Card No.: _____
Expiry date: _____ Signature: _____