

OSSTF/FEESO Certification Department, 60 Mobile Drive, Toronto, Ontario M4A 2P3  
Phone: 416-751-8300/800-267-7867 Fax: 416-751-0910  
Further Information at [www.osstf.ca](http://www.osstf.ca)

**PERSONAL INFORMATION**

Surname: \_\_\_\_\_ Given Name(s): \_\_\_\_\_

Former Surname (if applicable) : \_\_\_\_\_

Street Address: \_\_\_\_\_ City/Town: \_\_\_\_\_

Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_ Telephone Number: ( ) - \_\_\_\_\_

Social Insurance Number: \_\_\_\_\_ OSSTF/FEESO Member Number (if known): \_\_\_\_\_

Email Address: \_\_\_\_\_ Ontario College of Teachers Member Number: \_\_\_\_\_

**SCHOOL/DISTRICT INFORMATION**

District School Board Name: \_\_\_\_\_ Years with Board: \_\_\_\_\_

School Name: \_\_\_\_\_ School Telephone Number: ( ) - \_\_\_\_\_

 Academic Teacher or  Technological Teacher**ACADEMIC INFORMATION****INITIAL BACHELOR'S DEGREE** (if applicable)

University: \_\_\_\_\_ Country of Origin: \_\_\_\_\_ Year obtained: \_\_\_\_\_

Degree held: \_\_\_\_\_  3 year  4 year  Other (please specify): \_\_\_\_\_**POST-GRADUATE DEGREE(S)** (if applicable) (Master's, Doctorate)

University: \_\_\_\_\_ Country of Origin: \_\_\_\_\_ Year Obtained: \_\_\_\_\_

Degree/Diploma held: \_\_\_\_\_  1 year  2 year  Other (please specify): \_\_\_\_\_**ADDITIONAL QUALIFICATION COURSES** (if applicable)

<u>Course</u>	<u>University/Institution</u>
_____	_____
_____	_____
_____	_____
_____	_____

## **DOCUMENTS TO BE SUBMITTED**

- Certificate of Qualification or Transitional Certificate of Qualification  
(Photocopy or printout from the Ontario College of Teachers website is acceptable)
- Proof of OSSTF/FEESO Membership **OR**  Voluntary Member  
(Photocopy of any of the following: contract, acceptance of position form, letter of intent, pay stub showing OSSTF/FEESO dues, letter from OSSTF/FEESO Bargaining Unit President or Principal confirming completion of at least one day of teaching, OSSTF/FEESO membership card)

**[New members with an existing LETTER OF ASSESSMENT or LETTER OF APPRAISAL need not submit any further documentation]**

### **ACADEMIC TEACHERS:**

- Official transcript of initial Bachelor's Degree including advanced standing/transfer credit
- Official transcript(s) of Post-Graduate Degree(s) or Diploma(s) including advanced standing
- Official transcript(s) of Additional Qualification courses
- Official CEGEP transcript
- Official transcript of General Certificate of Education A-Levels

### **TECHNOLOGICAL TEACHERS:**

- Original or Notarized \* copies of the Certificate of Apprenticeship and Trade Certificate of Qualification issued by the Ministry of Training, Colleges and Universities
- Forwarded  Enclosed
- Official transcript(s) of Grade 13/OACs/Grade 12 U/M
- Official transcript(s) of University course(s) and/or College course(s)
- Official CEGEP transcript
- Official transcript(s) of Additional Qualification course(s)

**TRANSCRIPTS:**  Forwarded by Registrar  Enclosed

**Photocopies of transcripts are not acceptable. They must contain the seal and stamp from the issuing authority.**

*\*Trade documents may be notarized by a Notary Public, Swearer of Oaths, Lawyer or Teacher Bargaining Unit President.*

**AUTHORIZATION:** I hereby consent to the collection, and use of the above-noted information by the Ontario Secondary School Teachers' Federation. This information shall be exclusive for the purposes of union administration and the representation of our members.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

**NOTE: This application will NOT be processed until ALL of the required documents are received. Allow a minimum of 8-10 weeks for processing.**