

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)

An OSSTF/FEESO Certification Letter of Appraisal may be given to a non-member and/or to someone not certified to teach in the Province of Ontario. This appraisal will provide the applicant with information on their Group placement for salary purposes under the OSSTF/FEESO Certification Chart based on the current Certification Regulations established by the OSSTF/FEESO Provincial Assembly.

Original transcripts must be provided, including advanced/transferred credit courses. Photocopies or fax copies of transcripts are NOT acceptable. Transcripts will NOT be returned. Transcripts must contain the seal and stamp from the issuing authority. (Notarized translations will be required for transcripts that are not in English or French).

There is a \$125.00 fee for this service, which is payable to the Treasurer of OSSTF/FEESO.

Please forward this application and relevant documents (ie transcripts and service fee) to :

OSSTF/FEESO Certification Department  
60 Mobile Drive  
Toronto, Ontario M4A 2P3

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

### **PERSONAL INFORMATION**

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

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

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

Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_ Country: \_\_\_\_\_

Social Insurance Number: \_\_\_\_\_ Telephone Number: ( ) - \_\_\_\_\_

Email Address: \_\_\_\_\_

**ACADEMIC INFORMATION**

**INITIAL BACHELOR'S DEGREE (if applicable)**

University: \_\_\_\_\_ Country of Origin: \_\_\_\_\_ Year Obtained: \_\_\_\_\_  
Degree Held: \_\_\_\_\_  3 Year  4 Year  Other (Please specify) \_\_\_\_\_

**OFFICIAL TRANSCRIPTS:**  Forwarded by Registrar  Enclosed

**POST-GRADUATE DEGREE(S) (if applicable) (Master's, Doctorate)**

University: \_\_\_\_\_ Country of Origin: \_\_\_\_\_ Year Obtained: \_\_\_\_\_  
Degree/Diploma Held: \_\_\_\_\_  1 Year  2 Year

**OFFICIAL TRANSCRIPTS:**  Forwarded by Registrar  Enclosed  Not Applicable

**ADDITIONAL QUALIFICATION COURSES (if applicable)**

Course	University/Institution
_____	_____
_____	_____
_____	_____

**OFFICIAL TRANSCRIPTS:**  Forwarded by Registrar  Enclosed  Not Applicable

**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

***\*Trade documents may be notarized by 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

