

Application Form A-11 Post TESL Certificate Training (PTCT) Course Approval

PTCT Course Provider's Name and Address		
Staff Member Coordinating PTCT Training		
Name:	Position:	
Tel:	Email:	
Fee & Method of Payment		
<p>Application fee: \$452.00 (HST included)</p> <p>• Method of Payment: Please provide your phone number below. A TESL Ontario staff member will contact you during regular business hours to collect your payment information.</p> <p>Phone Number: _____</p>		
<p>I hereby personally certify to TESL Ontario that:</p> <ol style="list-style-type: none"> 1. I have read and understood the TESL Ontario standards, and terms and conditions for PTCT course approval; 2. This application was prepared by myself and others employed by the provider applying for PTCT course approval; 3. The information provided in this application package is, to the best of my knowledge, true and correct as of the date of this application; and 4. I fully appreciate that any intentional or negligent misrepresentation of any of the information contained in this application may result in a revocation of the TESL Ontario approval, should it be granted. 		
Name:	Position:	
Training Provider:	Date:	Signature:
<p><u>For Office Use Only</u></p> <p>Method of Payment: <input type="checkbox"/> Cheque <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order/Bank Draft</p> <p>Application Fee: <input type="checkbox"/> \$452.00 (HST included)</p> <p><input type="checkbox"/> Received: Initials..... Date <input type="checkbox"/> Charged: Initials..... Date</p>		

Questions? Please contact TESL Ontario at accreditation@teslontario.org or at 416-593-4243, x. 205.