

ADDITIONAL QUALIFICATION CERTIFICATION OF TEACHING EXPERIENCE

NAME OF APPLICANT: _____

SCHOOL WHERE EMPLOYED: _____

COURSE APPLIED FOR: _____ SESSION: _____

APPLICANT HAS APPLIED FOR: PART 2 Specialist

For this purpose a Supervisory Officer is defined as follows:

(a) For a teacher employed by a School Board, the Supervisory Officer is a Superintendent or Assistant Superintendent of the Board. **A Principal's signature does not satisfy this requirement.**

(b) For a teacher employed by a private school, the Supervisory Officer is the Ministry of Education official appointed to provide supervisory services for the school. **A Principal's signature does not satisfy this requirement.**

Admission to Part 2 or Specialist courses **could be delayed until this form, duly signed by a Supervisory Officer, is received.**

PART 2 COURSES

Supervisory Officer's Certification

I certify that the applicant named above has successfully completed at least one (1) year (194 days) of successful teaching experience.

Name (printed) of Supervisory Officer Date

Signature of Supervisory Officer Telephone

Title of Supervisory Officer

School Board

SPECIALIST COURSES

Supervisory Officer's Certification

I certify that the applicant named above has successfully completed two (2) years (388 days) of successful teaching experience, including at least one year (194 days) of experience in the subject listed above.

Name (printed) of Supervisory Officer Date

Signature of Supervisory Officer Telephone

Title of Supervisory Officer

School Board

