



**Part-time Studies
Continuing Teacher Education Program
Pre-Admission Information Form**

**Seneca Additional Qualification Courses
Pre-Admission Information Form**

IMPORTANT:

If the Ontario College of Teachers has placed any restrictions, limitations, or conditions on your teaching certificate, which may jeopardize your eligibility for reporting to the OCT, it is solely your responsibility to ensure that you meet OCT's requirements prior to registering for an AQ course. As well, you must ensure you meet the OCT and Seneca's AQ course prerequisites. For more information, visit <http://www.senecacollege.ca/ce/education/teacher-training/continuing-teacher-education-program.html>, "Admission Requirements", and "Courses".

Please ensure that all fields marked *Mandatory are completed. Successful candidates will be contacted via email with instructions for completing course registration.

<input type="checkbox"/> New Admission <input type="checkbox"/> Continuing Teacher Education Student** <small>**You have previously taken an AQ offering with Seneca College</small>		GENDER <input type="checkbox"/> Male <input type="checkbox"/> Female	OCT REGISTRATION NUMBER <small>* Mandatory</small>
SURNAME <small>* Mandatory</small>	FIRST NAME <small>* Mandatory</small>		MIDDLE NAME
DATE OF BIRTH (MM/DD/YY) <small>* Mandatory</small>	LANGUAGE SPOKEN <input type="checkbox"/> English <input type="checkbox"/> French <input type="checkbox"/> Other		EMAIL ADDRESS <small>* Mandatory</small>
MAILING ADDRESS <small>* Mandatory</small>		NAME OF SCHOOL BOARD (if applicable)	
		NAME OF SCHOOL (if applicable)	
CONTACT PHONE (PREFERRED) <small>* Mandatory</small>	CONTACT PHONE (ALTERNATE)	CONTACT PHONE (OTHER)	
CITIZENSHIP <small>* Mandatory</small> <input type="checkbox"/> Canadian Citizen <input type="checkbox"/> Permanent Resident			

FREEDOM OF INFORMATION AND PROTECTION OF PRIVACY ACT

Personal information on this form is collected in accordance with sections 21, 39, and 49 of the *Freedom of Information and Protection of Privacy Act* and under the legal authority of the *Ministry of Training, Colleges and Universities Act*, R.S.O. 1990, and the *Ontario Colleges of Applied Arts and Technology Act, 2002*, Regulation 34/03, and may be used and/or disclosed for administrative, statistical and/or research purposes of the College and/or the ministries or agencies of the Government of Ontario and the Government of Canada. This information will also be used for registration purposes at Seneca College and the Ontario College of Teachers. If you have any questions concerning the collection and use of personal information, please contact the Privacy Office at (416) 491-5050 ext. 77846, or via email at privacyoffice@senecacollege.ca.



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I have read the above statement and hereby authorize the release of information contained herein to the above mentioned.

Date: _____

COURSE INFORMATION

COURSE CODE	COURSE TITLE	START DATE (MM/DD/YY)
TAQ -		<input type="checkbox"/> On-site
		<input type="checkbox"/> Distance (On-line)
COURSE CODE	COURSE TITLE	START DATE (MM/DD/YY)
TAQ -		<input type="checkbox"/> On-site
		<input type="checkbox"/> Distance (On-line)

DECLARATION:

I hereby certify that the provided information is true and accurate, including my declaration of citizenship and immigration status. I understand that any misrepresentation of this information may result in the dismissal of my application to Seneca College's Continuing Teacher Education program.

I hereby authorize the Course Instructor to share the following personal information: participant's name and assigned Seneca email address, with the other candidates in the AQ course, for the purposes of facilitating on-line discussions and completing assigned tasks.

I ALSO CERTIFY THAT I UNDERSTAND AND AGREE TO ALL THE TERMS AND CONDITIONS AS LISTED ABOVE.

Date: _____

Prior to submitting your form, please review your information, and ensure that all fields marked **Mandatory* are completed. Once submitted, we will review the information you have provided and will contact you, via e-mail, with further instructions for completing your AQ registration.