



CERTIFICATE OF TEACHING EXPERIENCE FORM FOR ADDITIONAL QUALIFICATIONS (AQ) COURSES

For Part 2 of a Schedule D Specialist Course

Name of Applicant _____ OCT# _____

Part 2: Course applied for _____

TO BE COMPLETED BY THE SUPERVISORY OFFICER

All teaching experience must be:

- Accumulated while holding teacher certification in the jurisdiction where the experience was acquired. Teaching experience accumulated during expired/suspended time periods cannot be counted.
- Certified by an academic supervisory officer, if in Ontario, or the appropriate supervisory official if outside Ontario.
- For a teacher employed by a district school board in Ontario, the academic supervisory officer is a superintendent or assistant superintendent of the board.
- For a teacher employed by a private school or First Nations Education Authority in Ontario, the supervisory officer is the Ministry of Education official appointed to provide supervisory services for the school authority.
- A principal cannot sign off on this form.

I certify that the applicant named above holds a general certificate of qualifications and registration and has successfully completed one year (194 days) of teaching experience subsequent to certification by the Ontario College of Teachers.

Name of Supervisory Officer (please print) _____

Title of Supervisory Officer _____

School Board _____

Signature of Supervisory Officer _____ Date _____

Please email the form to Brian Stone: bms@niagara.edu

Niagara University in Ontario
Unit 113
2904 Highway 7 West, Vaughan, Ontario, L4K 0K4
905-294-7260, extension 1104