

CERTIFICATION FORM #4 – LETTER OF APPRAISAL

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.on.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: _____

Former Surname (if applicable) : _____

Street Address: _____

City/Town: _____

Province: _____ Postal Code: _____

Country: _____

Social Insurance Number: _____

ACADEMIC INFORMATION

INITIAL BACHELOR'S DEGREE (if applicable)

University: _____ Country of Origin: _____ Year Obtained: _____

Degree Held: _____ 3 Year 4 Year Other (Please specify) _____

TRANSCRIPTS: Forwarded by Registrar Enclosed

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

University: _____ Country of Origin: _____ Year Obtained: _____

Degree/Diploma Held: _____

TRANSCRIPTS: Forwarded by Registrar Enclosed Not Applicable

ADDITIONAL QUALIFICATION COURSES (if applicable)

Course

University/Institution

_____	_____
_____	_____
_____	_____

TRANSCRIPTS: Forwarded by Registrar Enclosed Not Applicable

FOR 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 by Registrar Enclosed

Official transcript(s) of Grade 13/OACs/Grade 12 U/M

Official transcript(s) of College Diploma(s) and/or University Degree(s)

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