

TEACHER CERTIFICATION BRANCH

APPLICATION FOR RE-ISSUANCE OF INTERIM PROFESSIONAL CERTIFICATE 2023-2024

(Authorized by the Minister pursuant to the Education Act, the Certification of Teachers and Teacher Leaders Regulation Alberta Regulation 84/2019)

APPLICANT: If you hold an expired Alberta Interim Professional Certificate, and wish to have it re-issued, you must complete this application form in full. Please return it to the recommending officer at the AISCA-DSA Program (address noted below) before the end of the current school year. The recommending officer will then forward the application to Alberta Education's Teacher Certification Branch.

1. APPLICANT'S PERSONAL INFORMATION:

Current Full Legal Name:			FILE/CERTIFICATE NO.
Title	Surname	First/Middle Names	From Alberta Education

List all other (previous) legal names:

NOTE: For both evidence of legal name change and of immigration/citizenship status you may choose to submit an unaltered copy of your original document(s) accompanied by a Statutory Declaration form(s) obtained from Alberta Education, Teacher Certification Branch, web site: <https://education.alberta.ca/> or by calling 780-427-2045 or toll free by dialing 310-0000.

Provide acceptable evidence of name changes. Photocopies of government issued birth certificate, marriage certificate, or legal name change certificate. **Do not send original birth or marriage certificates to AISCA.** Send copies to Alberta Education, Teacher Certification Branch. These documents can be uploaded to Alberta Education by logging into your TWINS Teacher Self Service account at https://extranet.education.alberta.ca/twins_public/public/

Date of Birth (yy/mm/dd)	Personal Phone	Work Phone	Personal E-mail
Work E-mail			

Citizenship Status: (check one)

- Canadian citizen by birth
- Canadian citizen by naturalization (granted)
- Permanent resident
- Other:

2. While holding your current Interim Professional Certificate, did you teach outside of Alberta?

___ No ___ Yes

If Yes, please indicate each province, state and country:		Place of Employment	FTE Years
Start Date (Year/Month)	End Date (Year/Month)		
Province, state and country:		Place of Employment	FTE Years
Start Date (Year/Month)	End Date (Year/Month)		

If Yes, arrange to have a current Statement of Professional Standing sent **directly to Alberta Education**, Teacher Certification Branch (see address on Applicant's checklist page) from the provincial, state, or national Department or Ministry of Education or College of Teachers responsible for certification.

3. Which Independent school has contracted you to teach next school year?

Name of School:	Start Date	End Date
Name of Principal:	Principal Email Address:	

4. Self-Declaration:

I declare that I have read and understood the competencies related to Interim Professional Certification as outlined in the Teaching Quality Standard and I hereby attest to possessing such competencies and to my ability to apply them appropriately toward student learning. I also commit to teaching practice and ongoing professional growth in keeping with the competencies and indicators identified in the Teaching Quality Standard. I declare that the particulars that have been furnished on this form are true and complete in all respects and that no relevant information has been withheld. I declare that all documentation that may be submitted by me has not been changed or altered in any way. I understand that a false declaration or willful omission, or submission of altered, tampered or forged documentation may result in the non-issuance, suspension or cancellation of my teaching certificate under the Certification of Teacher and Teacher Leaders Regulation.

Applicant's Signature

Date of Application

The personal information collected as part of this application process for teacher certification is collected pursuant to the provisions of the Certification of Teacher and Teacher Leaders Regulation, and section 33 of the Freedom of Information and Protection of Privacy Act (FOIP Act). This information will be used for the purpose of processing your application to determine your eligibility for extension of your interim professional certificate. The personal information will be treated in accordance with the FOIP Act. Questions regarding the collection may be directed to the Director, Teacher Certification Branch, Alberta Education, 44 Capital Boulevard, 10044 - 108 Street, Edmonton, AB, T5J 5E6. Telephone: (780) 427-2045; toll free by dialing 310-0000.

For Office Use Only

Date Received:

Date Reviewed

Reviewed by:

Good for submission:

Submitted to TWINS on:

Applicant Notified:

I confirm that this teacher continues to meet the requirements for the Alberta Interim Professional Certificate as prescribed by the Teaching Quality Standard and recommend the extension of such certificate.

Recommending Officer: Ray Battochio- AISCA DSA Officer

Signature: *Ray Battochio*

Date of recommendation: