

Application for International School Leadership Certificate Program

Education Leadership Canada 180 Dundas Street West - 25th Floor Toronto, ON M5G 128 Phone: 416-322-6600 Fax: 416-322-6618 www.principals.ca international@principals.ca

Greetings from Education Leadership Canada® (ELC), a division of the Ontario Principals' Council (OPC).

We are delighted that you are interested in the International school Leadership Certificate Program (ISLCP) and ELC is proud to be offering an international principal's course designed by principals for principals, and delivered by ELC in partnership with local boards of education. I am confident our program will provide you with an outstanding professional learning experience. It is my personal and professional pleasure to be involved in this enriching endeavour.

For specific inquiries about the ISLCP please contact international@principals.ca, or for general inquiries about ELC please e-mail ELC@principals.ca.

Sincerely,

Dr. Joanne Robinson Director of Professional Learning Education Leadership Canada Ontario Principals' Council



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Online Instructions

This form may be completed online and submitted by e-mail. Save your progress at any time by clicking the **SAVE TO FILE** button that appears at the bottom of every page. Save the form to a convenient location and enter a memorable file name. Upon completion, click the **SUBMIT BY EMAIL** button that appears at the end of the application (we recommend you save or print the form prior to e-mailing).

Print Instructions

www.principals.ca.

If you choose to mail in your application, you may type your answers and print the form or print a blank form and complete it by hand. To print the form at any time, click the **PRINT** button that appears at the bottom of every page. Complete the form and fax to 416-322-6618 or mail to:

Please note the ISLCP is only offered during the summer session at the following locations: Toronto, Ottawa,

Education Leadership Canada Attn: International School Leadership Certificate 180 Dundas Street West, 25th Floor Toronto, ON M5G 1Z8, Canada

Session Information

London, Ontario, Canada.	
Course Site (1st Choice):	Course Site (2nd Choice):
PART A - Personal Information	
Title: First Name: Middle N	lame: Last Name:
Address:	Address2:
City: Prov/State:	Country:
Postal/ZIP Code: Email:	Home Phone:
School/Office:	DSB (if applicable):
School/Office Telephone:	Date of Birth (dd/mm/yyyy):
Panel: Elementary Secondary	Other

Education Leadership Canada® recognizes the importance of privacy and the sensitivity of personal information. The ELC adheres to a Privacy Policy that is compliant with the Protection of Personal Information and Electronic Documents Act. You may access this Policy at



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Part B - Academic Qualifications

	Degree	Date Conferred	University
1.			
2.			
3.			

PART C - Certification of Teaching Experience

All applicants for ISLCP Part I must submit proof of five (5) school years of successful classroom teaching experience in a school providing elementary or secondary education.

Teaching experience must be recorded on official school letterhead, signed by the superintendent or an equivalent. The original signed letter must be mailed to:

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Part D - Fee Payment Form

Please print a	and fax this page to 416-322-6618. S	ignature required for payment processing.
Title: First Name:	Middle Name:	Last Name:
Email:	Home Phon	e:
Fee Schedule Course Fee: Part I: \$1190.00 Includes \$50.00 non-refunde	O CDN (HST Included) able registration fee. Fees are in	come tax deductible.
ee Payment Authorizat	ion	
Option A: Money Orde	er Payment	
Option B: Credit Card	and mailed to: Education Leadership Ca Attn: International School 180 Dundas Street West Toronto, ON M5G 1Z8 Payment (fax to 416-322	ol Leadership Certificate Program , 25th Floor CANADA
- ☐ VISA ☐ Mastercar	•	
Cardholder's Name (if different	than applicant):	
Card Number:		
Expiry Date (mm/yy):	C V V (last 3 digits on	back of card):
Cardholders's Signature:		
FOR OFFICE USE ONLY		
Amount to be Paid: \$	Authorized by:	Date:
Amount to be Refunded: \$	Authorized by:	Date:



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Part E - Application Checklist

I will mail in my teaching experience certifying my total number of years of teaching experience (minimum			
five (5) years).			
rstand that I may be offered a oplication cannot be fully approved as been received.			
Note: ELC must authenticate and evaluate all applicants' qualifications to ensure that they meet the requirements.			
$\hfill\Box$ By checking this box and by signing below, I am attesting that all information on this application form is to be completely true.			
Date:			