

Recommendation Waiver Agreement

For teachers who are not registered with the Ontario College of Teachers



Office of Continuing Teacher Education
Faculty of Education, Room A113
511 Union St W
Queen's University
Kingston, Ontario, K7M 5R7
Tel: (613) 533-2387 Fax: (613) 533-6702
Web: www.coursesforteachers.ca

Course Details

Course Title: Term: Year:

Personal Information

Name: Date of Birth:

Address:

Telephone Number: E-Mail Address:

Please read carefully

By signing below, I certify that I fully understand and agree with these conditions:

- a) Registration in the above course at the Faculty of Education, Queen's University during the term and year noted above will not result in a recommendation being sent to the Ontario College of Teachers now, or at any time in the future.
- b) Should I wish to receive recognition from the Ontario College of Teachers for the above course, I will be required to register in and complete the above course again in accordance with the policies and fees in effect at that time.

Signature: Date:

The personal information collected on this form is done under the legal authority of the Royal Charter of 1841, as amended, and the Ontario College of Teachers Act. This information will be used for registration purposes at Queen's University and the Ontario College of Teachers. Questions or concerns about the information collected or how it will be used can be directed to the Dean of Education, Dr. Rosa Bruno-Jofré, at (613) 533-6210.

Please note: This form must be submitted at the time of application and is due no later than the application deadline. This form may be faxed. Original not required.