

APPLICATION FOR INTERIM PROFESSIONAL CERTIFICATION

(Authorized by the Minister pursuant to the School Act, TSA 2000 Chapter S-3)

Sections: 92(1), 93, 276 and the Certification of Teachers Regulation AR 3/99 as amended by AR 106/2010

Application Reference #: 649916

The personal information collected as part of this application process for teacher certification is collected pursuant to the provisions of the Certification of Teachers Regulation, and section 33(c) of the Freedom of Information and Protection of Privacy Act (FOIP Act). This information relates directly to and is necessary for the administration of the certification process and may be used to conduct statistical, evaluative, financial analyses in addition to forecasting relating to teachers. The information may be used to contact you regarding Alberta Education surveys and issues relevant to the teaching profession. The information will also support activities including research related to the recruitment and retention of First Nations, Métis and Inuit teachers in the education sector. The personal information will be treated in accordance with the FOIP Act. Questions regarding the collection may be directed to the Registry Manager, Teaching and Leadership Excellence Sector, Alberta Education, 44 Capital Boulevard, 10044 – 108 Street, Edmonton, Alberta T5J 5E6. Telephone: 780-427-2045 (Alberta residents dial 310-0000 to be connected toll-free from outside the Edmonton area).

Current Full Legal Name		Place of Birth		
Title: Mr Given Name: Ramon Middle Name: Surname: Cutanda Lopez Preferred Name: Gender: Male		Birth Date: ----, ---- Birth Country: Spain Birth Province/State: Murcia Birth City: Cieza		
Previous Legal Names				
Title	Given Name	Middle Name	Surname	Preferred Name
Mailing Address and Contacts			Immigration/Employment Status	
Address Line 1: ----- Address Line 2: ----- Address Line 3: Address Line 4: Country: Spain Province/State: Murcia City Name: Cieza Postal Code: 30530 Phone Number: ----- Alternate Phone: ----- Email Address: -----			Work Permit	

Third Party Contact Authorization Section

Complete this section ONLY if you wish to authorize another person ("third party") to provide information on your behalf and/or to receive information from Teaching and Leadership Excellence regarding your application.

Given Name:	Third-Party Contact Date
Surname:	From:
Phone Number:	To:
Email Address:	

I authorize the person named as "Third-Party Contact" above to act on my behalf regarding any inquiries related to my application for Alberta teaching authority.

I authorize Teaching and Leadership Excellence to provide information to the "Third-Party Contact" person named above, in any matters related to my application for Alberta teaching authority.

This authorization remains in effect for the time period specified above, or until a signed letter of cancellation is received by Teaching and Leadership Excellence.

Applicant's Name (Print)

Applicant's Signature

Date

Alberta Teaching Authority Section

Have you previously held an Alberta Teaching Certificate? Yes No

Have you ever previously had your credentials assessed for Alberta Teaching Authority? Yes No

Teacher Preparation Program Section

Institution Name: Universidad de Murcia

Location of Institution: Murcia, Murcia, Spain

Did you attend Full or Part Time? Full Time Part Time

Dates of Attendance: September 1996 - September 1999

Credential Earned: Bachelor of Education Elementary

Year Credential Earned: September 1999

Method of Program Delivery: On Campus

Program Service Method: Pre-Service

Language of Instruction: Spanish and English

Primary Specialization: Elementary Education

Additional Specialization: Second Languages

Notes:

Supervised Teaching

Did your teacher preparation include any formal period(s) of *supervised student teaching*? Yes No

If Yes, indicate number of weeks: 12

Hours per week providing instruction in the classroom or school setting: 26

Check each grade level range in which supervised student teaching was completed:

Kindergarten Grades 1-6 Grades 7-9 Grades 10-12

Secondary Education: Original High School, University entrance and / or matriculation records may be required.

Institution Name: IES Diego Tortosa
 Location of Institution: Cieza, Murcia, Spain
 Language of Instruction: Spanish
 Dates of Attendance: September 1991 - September 1995
 Credential Earned: Senior High
 Year Credential Earned: September 1995
 Notes:

Post-Secondary Institution(s) Attended: Official transcripts must be sent directly from each institution(s) attended to this office.

Institution Name: Universidad de Murcia
 Location of Institution: Murcia, Murcia, Spain,
 Did you attend Full or Part Time? Full Time Part Time
 Method of Program Delivery: On Campus
 Language of Instruction: Spanish and English
 Dates of Attendance: September 1996 - September 1999
 Credential Earned: Bachelor of Education Elementary
 Year Credential Earned: October 1999
 Notes:

I hereby authorize the Registrar for teacher certification of Alberta Education to contact any of the institutions that I have attended to clarify or obtain any information required for the assessment of my credentials.

Applicant's Name (Print)

Applicant's Signature

Date

Teacher Certification - Evidence of valid certification must be sent directly from the jurisdiction in which your teacher preparation program was completed:

Do you or have you ever held certification outside of Alberta? Yes No

List all teaching authority held including temporary or restricted certificates (from initial to most recent).

Note: Evidence of valid certification from the certifying body is required.

Province/State: Murcia, Spain
 Certificate or license (select "Other" if your certificate is not listed): Bachelor of Education Elementary (Maestro)
 Date Issued September 2001
 Years Taught 15.50

If you have not obtained teaching authority from the certifying organization where you received your initial teacher preparation program, please explain.

Teaching Experience - Evidence of valid certification must be sent directly from all jurisdictions where you have taught:

If you have not taught, check here.

List all experience in chronological order.

Location (Province/State/Country)	Employment Dates		Grades Taught
	From:	To:	
Murcia, Spain	August 2001	April 2017	Elementary and Junior

Self-Declaration

I declare that I have read and understood the descriptors of knowledge, skills and attributes (KSAs) related to interim professional certification as outlined in the Teaching Quality Standard Ministerial Order 016/97 and I hereby attest to my ability and commitment to apply them appropriately toward student learning. I commit to teaching practice and ongoing professional growth in keeping with the Teaching Quality Standards and descriptors of quality teaching under the Ministerial Order 016/97.

 Applicant's Name (Print)

 Applicant's Signature

 Date

Self-Disclosure

All questions must be answered. A false declaration or omission may be grounds for the denial, suspension or cancellation of a teaching certificate. Despite your response to any of the questions below, you will be required to provide this office with a current criminal record check and additional documentation as requested.

Certificate or License

1. **Has your application for certification or credential, certificate, permit or license to teach in Canada or in another country ever been denied, suspended, cancelled, or been subject to limitations?**

Yes No

If yes, please complete the following:

Location:

Date:

Details:

2. **Have you ever voluntarily or involuntarily surrendered your credential, certificate, permit or license to teach in another jurisdiction?**

Yes No

If yes, please complete the following:

Location:

Date:

Details:

Conduct and Competence

3. **Have you ever been asked by a teacher preparation institution to withdraw from a teacher education program?**

Yes No

If yes, please complete the following:

Location:

Date:

Details:

4. **Are you currently or have you ever been subject to an inquiry, investigation, or proceeding with respect to your professional conduct, or competency, in relation to the teaching profession, including your teacher-education program?**

Yes No

If yes, please complete the following:

Location:

Date:

Details:

5. Have you ever been subject to an investigation or proceeding related to working with children or students in capacities other than teaching?

Yes No

If yes, please complete the following:

Location:

Date:

Details:

6. Have you ever been prevented from carrying on your duties as a member of the teaching profession as a result of any disciplinary proceedings?

Yes No

If yes, please complete the following:

Location:

Date:

Details:

7. Have you ever been found guilty of professional misconduct or been found to be incompetent or incapacitated as a member of the teaching profession or any other profession?

Yes No

If yes, please complete the following:

Location:

Date:

Details:

Employment

8. Have you ever agreed to a settlement or resignation to avoid formal employment action, or any proceedings or disciplinary action with respect to your professional conduct, competence or capacity to teach?

Yes No

If yes, please complete the following:

Location:

Date:

Details:

9. Have you ever been suspended, terminated, resigned or retired or have you ever been placed on leave pending investigation due to professional misconduct or incompetence?

Yes No

If yes, please complete the following:

Location:

Date:

Details:

Criminal Conduct

NOTE: The word "offence" in the next three questions refers to any statute and includes, but is not limited to, the [Criminal Code of Canada](#) and the [Controlled Drugs and Substances Act of Canada](#), or their equivalent in another country.

10. Are you currently or have you ever been under investigation or charged with any offence under any statute, whether in Canada or in another country?

Yes No

If yes, please complete the following:

Offence**	Location	Date

11. Have you ever been convicted or had a record suspension (pardon) under the [Criminal Records Act](#) of a criminal offence under any statute whether in Canada or in another country?

Yes No

If yes, please complete the following:

Offence**	Location	Conviction Date	Pardon Date

**For each offence listed, please provide all official Notice(s) of Conviction certified by the Clerk(s) of the Court where the conviction(s) took place.

12. Have you ever been given a conditional discharge in respect to the above noted criminal offence?

Yes No

Nature of Discharge	Discharge Date

NOTE: The presence of a record of charges or convictions does not necessarily exclude you from certification. Each case will be reviewed to determine its relevance to the requirements of the teaching profession on an individual basis and in accordance with the [Certification of Teachers Regulation](#).

Undertaking

I understand that I may be required to provide an official criminal record search document by fingerprint comparison. I understand that I am responsible for all costs involved in providing such documentation to the Registrar for teacher certification of Alberta Education. I hereby undertake to provide, upon request, official police records when and as required.

I understand that no qualifications assessment can be made until Alberta Education receives all required documents, and that the Registrar may require additional information.

I agree that if there are any changes to the information I have provided to Alberta Education in this application between the time of the submission of my application and when the Registrar grants me a teaching certificate, I will immediately advise Alberta Education and provide the new information.

Authorizations and Acknowledgements

I acknowledge that the [Certification of Teachers Regulation](#) authorizes the Registrar for teacher certification of Alberta Education to conduct and review, at his discretion, a criminal record check, background check or inquiry from any police authority or other authority, organization or institution with regard to any criminal conviction or charge or any of the other matters referred to in the Self-Disclosure section.

I further authorize and consent to the release of such details of convictions and outstanding charges by any law enforcement agency or authority to the Registrar of Alberta Education for teacher certification.

I also consent to the release of my personal information, including all personal information related to criminal convictions or disciplinary matters, including information about outstanding charges, to school authorities requesting such information.

I acknowledge that the [Certification of Teachers Regulation](#) authorizes the Registrar for teacher certification of Alberta Education to contact any of the institutions that I have attended and/or certifying/licensing authorities, to clarify or obtain any information required, as deemed relevant for certification purposes. I also acknowledge that the Regulation authorizes Alberta Education to make inquiries and exchange information with any jurisdiction or certifying/licensing authorities.

DECLARATION

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 I have provided directly to the Registrar of Alberta Education, 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 of a teaching certificate, or, if discovered after I have been granted a teaching certificate, may result in suspension or cancellation of my teaching certificate under the [Certification of Teachers Regulation](#).

Applicant's Name (Print)

Applicant's Signature

Date

APPLICATION CHECKLIST FOR APPLICANTS PREPARED AS TEACHERS OUT OF COUNTRY.

Important - Before you mail your application, please review the following application items:

- Ensure you have provided your signature in all required sections on the printed application form.
- If you did not pay the application fee on-line:
 Enclose a cheque or money order made payable to the Government of Alberta.
- OR
- On-line payments can be made through our Teacher Self-Service website.
- Enclose or arrange to provide acceptable evidence* of all names used for legal purposes.
- Enclose or arrange to provide acceptable evidence* of your immigration/employment status in Canada.
- Enclose or arrange to provide a photocopy of your birth certificate, if your place of birth is Canada.
- Enclose or arrange to provide a current original Criminal Record Check that includes a vulnerable sector check; one that has been done within the last six months.
- Request official transcripts to be sent directly from each post-secondary institution attended to this Office OR provide original irreplaceable* documents to this Office.
- Request a Statement of Professional Standing to be sent directly from all jurisdictions where you hold or have held certification including the jurisdiction where you completed your teacher preparation program.

Mailing Address Teaching and Leadership Excellence Sector 2nd Floor, 10044 108 Street Edmonton, AB T5J 5E6	
Teacher Certification Application Fee (Application Fees are Non Refundable)	\$250.00