



# Trinity CertTESOL Application

## PERSONAL INFORMATION

Name (in full)

Address

E-mail

Date of birth

Nationality

First language

Current Place of Employment and duties

Previous working experience

## EDUCATION

Secondary/High School qualifications

Higher Education

Other qualifications

IELTS/TOEFL score (if applicable)

How did you find out about this course?

Preferred Course Dates

3 - 28 July 2017

2 - 18 October 2017 (provisional)

Name and Address of two referees

Have you ever had a criminal record?

Yes

No

Do you have any health problems which may affect your ability to complete the course?

Yes

No

I understand that I will have to sign a form giving consent for my final course interview with the moderator to be recorded, and I agree to sign this.

Yes

No

**Please Note:**

**Applications close 3 weeks prior to the commencement of the course.**

Please save this form and e-mail it to [tesol@ialf.edu](mailto:tesol@ialf.edu)