

# 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

July 2025 (dates to be confirmed)

Name and Address of two referees

Have you ever had a criminal record?      Yes  
No

Do you have any health problems which      Yes  
may affect your ability to complete the      No  
course?

I understand that I will have to sign a      Yes  
form giving consent for my final course      No  
interview with the moderator to be  
recorded, and I agree to sign this.

**Please Note:**

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

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