



CESL TEACHER-TRAINING PROGRAMS Application for Certificate & Workshop Registration

Date _____

FAMILY NAME _____ FIRST NAME _____ GENDER M ___ F ___

COUNTRY & CITY OF BIRTH _____ COUNTRY OF CITIZENSHIP _____

DATE OF BIRTH _____ (mo/day/yr) TYPE OF VISA/IMMIGRATION STATUS _____

International Applicants Only: PASSPORT NUMBER _____ Please include a copy of your passport.

If you are a University of Arizona student or employee, please list your UA Netid _____

TEACHING EXPERIENCE: Subject _____ Level _____ Years _____

Volunteer Service Organization such as Peace Corps, VISTA, Americorp? Please Specify. _____

Are you part of a group? List group name and date _____

Permanent Home Country Street Address

Contact Information

Phone _____

Email _____

Emergency contact person _____

Emergency phone contact _____

Local Address in Tucson

Do you plan to earn a complete program certificate or only take individual workshops? If yes, which certificate?

Please see the web for dates of current and future programs.

_____ TEFL Online Basic
(50 hours \$550)

Prerequisite: some university
coursework or with coordinator
approval

_____ TEFL Full (100 hours \$1500)

_____ TEFL Online Advanced
(50 hours \$550) Prerequisite:

some university coursework and 2 years
teaching experience OR Basic TEFL
certificate and 20 hours practicum certificate
OR with coordinator approval

_____ 20-hr Practicum (\$375—

Prerequisite is the 50-hr Basic
TEFL Certificate or with coordinator
approval)

If you are applying for the 100-hr TEFL certificate or the Advanced TEFL certificate, please submit a current resume and a letter of recommendation from your current employer or professor.

Please check the web for current offerings. <http://www.cesl.arizona.edu/TeacherTraining.htm>

Telephone 520-621-6211

Email teachesl@email.arizona.edu

If you wish to register for only one workshop or option, please write the name here. _____

I have read and completed all pages of this application accurately. I understand the conditions for eligibility and have met them. I will bring proof of MMR for study in Arizona. I attest that I carry sufficient insurance for the duration of my program. I understand that completing this teacher training program does not guarantee employment. All information on this application is true to the best of my knowledge.

Applicant's Signature

Date



There are 3 ways to submit your application and fees:

1. Print the application from our website at <http://www.cesl.arizona.edu/TeacherTraining.htm> Complete, and email it to cesl@email.arizona.edu You must include credit card information for tuition and fee payment.
2. Pay your tuition with a credit card and fax the application to 520-621-9180, or
3. Mail or bring your application and payment to CESL at the following address.

Center for English as a Second Language, Admissions Office
The University of Arizona P.O. Box 210024
1100 E. James E. Rogers Way
Tucson, Arizona 85721- 0024 USA

Make check or money order payable to: *The University of Arizona.*

Receipts will be mailed to those who pre-register. There is a \$40 fee for returned checks or declined credit cards.

Total Payment, including tuition & fees, is due with the application. Each workshop or certificate program must have a minimum number of participants. Tuition will be refunded if a program or workshop is canceled.

Application Fee (non-refundable)	\$ 30.00
Program Fee	\$ 20.00
Basic 50 hr TEFL Tuition	\$ 550.00
20-hr Practicum	\$ 375.00
Advanced 50-hr TEFL tuition	\$ 550.00
TEFL 100-hr Tuition	\$1500.00

Only one discount can be applied to full tuition. See discounts at <http://www.cesl.arizona.edu/cost.htm>

Which discount are you claiming? _____

Amount of discount _____

Late Registration: _____

on or after 1st day of class +10% tuition _____

TOTAL PAYMENT ENCLOSED \$ _____

Late and application fees are non-refundable.

CREDIT CARD AUTHORIZATION FORM

I hereby authorize The University of Arizona to charge the total payment above (US) to my credit card. MASTERCARD VISA or American Express CID # _____

Card # _____ Expiration Date ____/____/____

Card holder name (Please print) _____

Card holder Signature: _____

Billing Address _____ Telephone _____

Email address _____

If you are paying by credit card, and wish to expedite your application, you may fax your completed application documents. Fax: 520-621-9180

If you are an international student on an F-1 visa, you must complete the financial documentation in the regular CESL application and buy CESL health insurance.

<http://www.cesl.arizona.edu/docs/APPLICATIONforEnglishStudy.pdf>

If you were referred by an agent, include the name and email.

International Applicants should contact us for information about visa eligibility at mgoold@email.arizona.edu .

How did you learn about CESL?

Referral

friend or relative

present or past student at CESL

United States embassy

UA department

radio

Internet

Study USA

US Journal

Versation

CESL web page

Apply ESL

General Web Search

Are you UA Staff, faculty or student? _____ Which department? _____

Have you ever studied at CESL? When? Semester _____ year _____ day or evening _____ Student id# _____

Do you have a disability that requires special accommodation? If yes, explain. _____

CESL and the UA welcome all students, including students with disabilities. Please advise CESL of any special accommodations you might need **prior** to arriving in Tucson. All students must make their own housing arrangements.