Bachelor of Education New Graduates Waiver Form

Applicant: ____________________________     Western Student Number: ________________

AQ course: ___________________________    Session / Year: ____________________________

B.Ed Degree:      Expected Completion Date: ___________________________

Degree Institution: __________________________________

Admission to a Western AQ course prior to full certification with the Ontario College of Teachers is conditional. Completion of this form indicates your acceptance of the following conditions:

i. Submission of all documentation as outlined on your WPE AQ Student Portal Application.
ii. I acknowledge that failure to complete the OCT certification process by the specified dates on my WPE AQ Application, will result in the AQ course being considered for professional development purposes. I understand that under these circumstances the completed AQ course would not be reported to the OCT and the qualification would not be listed on my teaching certificate at any time. To receive the qualification, I would be required to retake and successfully complete the AQ course again after OCT certification is granted.

__________________________________________     ________________________________________
SIGNATURE                                                                                DATE

Please sign and date this waiver and return to the ASPIRE Department Office by email, fax, or mail. This signed waiver must be received by the AQ session start date.

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