# Name: Click here to enter text.

# Language Teacher or/and Tester

**Address:** Click here to enter text.

**City:** Click here to enter text. **ZIP Code:** Click here to enter text.

**Telephone:** Click here to enter text.  **Email:** Click here to enter text.

# Qualifications

**(Please, check the box and fill the empty space)**

A native speaker of the Click here to enter text. language (to be taught);

A Bachelor’s degree (at least) Click here to enter text.(from a recognized university);

The ILR’s Proficiency Level 4 in the language to be taught;

Proficiency in either or both of Canada’s official languages (ILR’s level 2) Click here to enter text.;

Number of teaching hours (experience teaching the language to be taught to adult learners) Click here to enter text.;

Completed the new CFSL Teacher Certification Course (**for the Administration use only**).

# Education

**(Please, expand as much as needed)**

|  |  |
| --- | --- |
|  | **Year:** Click here to enter text.  **Institution:** Click here to enter text.  **Country:** Click here to enter text.  **Degree:** Click here to enter text.(if from outside of Canada, mention if Canadian equivalency has been granted) |
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# pROFESSIONAL Experience

**(Please, expand as much as needed)**

|  |  |
| --- | --- |
|  | **From:** Click here to enter text. **To:** Click here to enter text.  **Company/Institution/Organization/School:** Click here to enter text.  **City:** Click here to enter text.  **Country:** Click here to enter text.  **Title of the position**   * Tasks: Click here to enter text. * Tasks: Click here to enter text. * Tasks: Click here to enter text. * Approximate No. of teaching hrs: Click here to enter text.   **From:** Click here to enter text. **To:** Click here to enter text.  **Company/Institution/Organization/School:** Click here to enter text.  **City:** Click here to enter text.  **Country:** Click here to enter text.  **Title of the position**   * Tasks: Click here to enter text. * Tasks: Click here to enter text. * Tasks: Click here to enter text. * Approximate No. of teaching hrs: Click here to enter text. |
|  |  |

# Technology

**(Please, list your skills and abilities in using, or willingness to learn technology and/or multimedia tools supplied, including as a minimum: Windows and word processing for Windows; email; Internet; You Tube; laptops; mobile devices (including tablets, smartphones and I-pods); multimedia technologies; spreadsheets and smart boards.)**

Click here to enter text.

# Security status

**(level, number, issue and exp. date)**

Click here to enter text.