## **ATA ESL Specialist Council Application**

First Name Last Name				
Do you have an Alberta Teaching Certificate?	Yes No	Is it?	Interim Permanent	
Are you currently an ACTIVE member of the ESL Council?	Yes No	Но	How many years?	
If you are not an active member of ESLC or not sure, would you like for ATA to change your free Specialist Council membership to English as a Second Language Council?				
Choose	Yes No			
Address				
City				Alberta
Postal Code			Cell Phone	
Home Phone			Work Phone	
Email #1				
Email #2				
Interested Table Officer Position (Vote at AGM) Interested Executive Position (Appointed by Table Officers)				

You are almost finished completing the form. Please scroll to the second page.

Brief description as to why you want to join ESLC as a Table Officer or Executive Member

Members of the Alberta Teachers' Association (ATA) as specified in ATA bylaws, are eligible for regular membership in this council. All such members shall be entitled to full privileges of ESL Council membership, including the right to hold office.

By filling this form, you are voluntarily providing your personal information and consenting to its collection, use and disclosure for all purposes connected with your participation as a member of the ESL Council, which is part of the ATA.

Please email application to the ESLC Secretary at ataeslcsecretary@gmail.com