



**Teacher of Indigenous Language as a Second Language
Statement of Fluency Form – Referee Attestation**

Name of Applicant: _____

Indigenous Language: _____

Please have your qualified referee complete the form below:

For this purpose, a qualified referee who can attest to your level of fluency in an Indigenous Language is as follows:

Chief and Council, Education Director, Education Authority Board member, Cultural Committee member or similar organization, a Principal of an accredited school, an Indigenous Language teacher certified by the Ontario College of Teachers.

Qualified Referee Certification

I certify that the applicant named above has a substantial oral fluency and a basic understanding of the writing system for _____ (please enter Indigenous language) necessary for entrance into Nipissing University's Teacher of Indigenous Language as a Second Language Program.

Name of Referee (please print)

Signature of Referee

Title of Referee

Name of Organization

Telephone Number

Email (optional)

Date