

**The Canadian Academy of Therapeutic Tutors
(Orton-Gillingham)
Math Specialty Certificate Application Form**

Box 34068-17790 #10 Highway
Surrey BC V3S 8C4

www.ogtutors.com Phone: 604 261.3125

FORM MUST BE FILLED OUT IN FULL AND RETURNED WITH PAYMENT

**PLEASE ENCLOSE YOUR MULTISENSORY MATH CERTIFICATE (MAY 2007) OR SURREY COLLEGE TRANSCRIPTS WITH THIS APPLICATION.*

Date: _____

Name: _____ Registration # _____

Address: _____

City: _____ Postal Code: _____

Phone Number: _____ Email: _____

As outlined in the CATT O-G Code of Ethics, it is necessary for all CATT members to:

be responsible to engage in continued professional education through workshops, conferences, seminars, college courses and programs in order to keep current with knowledge that pertains to the field of dyslexia and/or learning disabilities and thus to provide appropriate advice and service to the community.

My name may be provided to parents and professionals seeking Orton-Gillingham Math tutor referrals from CATT (O-G):

Yes _____ No, not at this time _____

Area(s) you live in or are willing to travel to for O-G Multisensory Math

tutoring: _____

Other comments: _____

Please check that your \$35.00 application processing fee is included. Thank you.

Amount remitted \$ _____

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You may also pay using your VISA or M/C. Contact Lauren Ryan at 604-261-3125 or
Email laureen-ogtutors@shaw.ca

**I have read the CATT Code of Ethics and Standards and agree to
adhere to them.**

(Code of Ethics can be found on the CATT O-G website www.ogtutors.com under resources).

Signature _____ Date _____