



Cambridge English CELTA 2026 Application Form

Please complete the following:

First name(s):	
Surname:	
Address:	
Telephone / Mobile No:	
Email address:	
Nationality:	
Place of birth:	
Date of birth:	
	<p>Please include a passport-style photo if possible.</p> <p>This is something that Cambridge ask for when we submit your portfolios later in the course, although it is not mandatory.</p>

Please continue to the next page.

Education

Please give details of all your qualifications from A-Level onwards, starting with your most recent qualification. Please state if you have completed your degree and, if not, what year you are in:

Date	Institution	Qualification	Subject	Grade

Training and experience

1. Do you have any initial training and/or experience in language teaching?

Please give qualification, institution, dates, grades, type of teaching experience.

2. Do you have any training and/or experience of teaching other subjects?

Please give details.

3. Do you have any other work experience or professional training?

Please give details.

Health and Special Support

General health

Please specify if you have any condition that may affect your ability to do the course

Do you need any special support during the course?

Because of a disability or medical condition

Do you require any reasonable adjustments to be made for you?

Please select from the list items that apply to you.

- | | |
|---|---|
| <input type="checkbox"/> Autistic Spectrum Disorder | <input type="checkbox"/> I use assistive technology or require accessible formats (e.g., screen readers, large print materials) |
| <input type="checkbox"/> ADHD | <input type="checkbox"/> I have a temporary medical condition that may impact my participation |
| <input type="checkbox"/> Specific Learning Difference (e.g. dyslexia) | <input type="checkbox"/> I have difficulty organising my time and prioritising tasks |
| <input type="checkbox"/> Hearing impairment | <input type="checkbox"/> I find it challenging to stay focused and avoid distractions |
| <input type="checkbox"/> Mental health condition | <input type="checkbox"/> I have difficulty working independently without regular guidance |
| <input type="checkbox"/> Mobility difficulties | <input type="checkbox"/> Do not wish to disclose |
| <input type="checkbox"/> Visual impairment | |
| <input type="checkbox"/> Unseen disability | |
| <input type="checkbox"/> Disability not listed | |

Please provide any relevant information here:

Language information

Mother tongue:	
Languages learnt Please state level of proficiency	
Other relevant information:	

Reference information.

Please give details of someone who knows you in a professional capacity.

Name:	
Address:	
Email:	
Telephone / Mobile No:	

Which type of course would you prefer to do?

Please select an option

- 100% online
- Mixed-mode
Partly online and partly face-to-face
- Either of the above

Autumn/Winter course for 2026

Part-time

- 23rd September - 16th December 2026

Which days and times are you available for an interview?

Would you prefer an interview online or face-to-face at our centre in Angel Islington?

- Online
- Face-to-face at EC in Angel Islington

How did you hear about EC London?

- Online search
- Cambridge website
- Recommendation from a friend
- Other (please state)

Please read and sign below

I understand that:

- As courses are designed for a limited number of participants, fees are required in advance and once a course has commenced fees are not refundable and that no partial refund can be given for any classes not attended. EC London cannot accept responsibility for unforeseen changes in a participant's circumstances that may prevent attendance;
- EC endeavour to run all advertised courses. However, there may be circumstances in which a course might need to be cancelled or transferred to another mode, e.g. online. In such cases, EC will notify participants before the start date;
- EC London reserves the right to cancel a course or replace a tutor if unavoidable;
- I will notify EC London as soon as possible of any change of address/email/telephone;
- EC London reserves the right to withdraw anyone who withholds information or gives false information.

Signature

You can type your name

Date

Please return this form to eclondoncelta@ecenglish.com