



EMPLOYMENT APPLICATION

Teaching Position

Given Name _____ Last Name _____
(Underline Name Used)

Mailing Address _____
(No.) (Street) (City/Town) (Prov.) (Postal Code)

Telephone No. _____ Email _____
(Primary) (Alternate)

Have you been employed previously by this Division? No Yes If yes, when _____

MANITOBA PROFESSIONAL SCHOOL PERSONNEL CERTIFICATION *(please check all that apply)*

Permanent Certification # _____ Provisional _____

Certificate Type

- General Professional Technical Vocational School Clinician School Leadership/Administrator
 School Leadership School Counsellor Special Education Special Education Coordinator

TEACHING PREFERENCE *(please rank in order of preference)*

Choose an item. Early Years Choose an item. Middle Years Choose an item. Senior Years
Choose an item. Adult Education Choose an item. Administration Choose an item. Substitute

SUBJECT AREAS

- | | | |
|---|--|--|
| <input type="checkbox"/> Aboriginal Studies | <input type="checkbox"/> French (Basic) | <input type="checkbox"/> Music (Band) |
| <input type="checkbox"/> Arts | <input type="checkbox"/> French (FSL) | <input type="checkbox"/> Music (Choral) |
| <input type="checkbox"/> Business Studies | <input type="checkbox"/> French (Immersion) | <input type="checkbox"/> Physical Education & Health |
| <input type="checkbox"/> Computer & Technology | <input type="checkbox"/> Guidance & Counselling | <input type="checkbox"/> Science – Biology |
| <input type="checkbox"/> Early Childhood | <input type="checkbox"/> History | <input type="checkbox"/> Science – Chemistry |
| <input type="checkbox"/> English as a Second Language | <input type="checkbox"/> Home Economics | <input type="checkbox"/> Science – Physics |
| <input type="checkbox"/> English & Classical Studies | <input type="checkbox"/> Industrial Arts (Specify) | <input type="checkbox"/> Social Studies & Humanities |
| | <input type="checkbox"/> Mathematics | <input type="checkbox"/> Vocational (Specify) |

SPECIAL EDUCATION AND RESOURCE

- | | | |
|--|--|--|
| <input type="checkbox"/> Behavioural Needs | <input type="checkbox"/> Emotionally disturbed | <input type="checkbox"/> Physical Disability |
| <input type="checkbox"/> Intellectual Disability | <input type="checkbox"/> Language Disability | <input type="checkbox"/> Visual Impairment |
| <input type="checkbox"/> Hearing impaired | <input type="checkbox"/> Learning Disability | <input type="checkbox"/> Resource |

LANGUAGE(S) *(Please indicate which languages in which you are able to fluently...)*

Language	Speak	Read	Write	Language	Speak	Read	Write
English	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Russian	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
French	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	German	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other _____				Other _____			



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Please append the following documents to this application:

- Cover Letter
- Manitoba Teacher's Certificate
(applicants without a certificate will not be given further consideration)
- Resume
- Educational Philosophy

REFERENCE CHECK RELEASE

I, _____, hereby give permission to Western School Division to contact the persons listed below for the purposes of obtaining reference information. These persons are aware that you will contact them and have my permission to discuss information regarding my current and/or previous employment.

Name	Phone Number /Email Address	Relationship

I hereby consent to your conducting a personal investigation in connection with this application under the terms of the Personal Investigations Act and acknowledge that any offer of employment by the Division is subject to a satisfactory criminal records check, vulnerable sector search, and child abuse registry check

I also declare that I have a valid Manitoba Teaching certificate and that I am not precluded from working in Canada.

Furthermore, once employed, should I ever be charged with a criminal or other offense excluding Highway Traffic Act offenses, I will divulge this to the Division within three working days.

I understand that the information provided by me in this application for employment to the Western School Division ("the Division") constitutes material and important representations by me intended to induce the Division to enter into a contract of employment with me. I therefore understand and agree that the giving by me of false, misleading or incomplete information in this application for employment will constitute just cause for dismissal of me from any employment entered into with me by the Division and will also fully justify the Division in treating any contract entered into by it with me to be null void.

If employed, I agree to abide by the policies, procedures and working conditions established by the Western School Division

Name (Please print)	Signature of Applicant	Date
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*Western School Division welcomes and encourages applications from people with disabilities.
Accommodations are available on request for candidates taking part in all aspects of the selection process.*