

# Job Application Form

POST DETAILS							
Post title:	itle: RECE SUPPLY TEACHER						
PREFERENCES							
If you have a prefere Should you leave this					ease indicate below your pro	eferences.	
PERSONAL DETA	AILS						
First name:							
Last name:							
Address:			C'	10.1			
Home Phone Numbe	et address er:	Unit	City Posta	al Code			
Work Phone Number	r:						
Mobile Phone Numb	er:						
E-mail Address:							
Are you registered w	rith the College of	Early Childhood	Educators? YE	S / NO			
If Yes, please provide	your registration	number:					
RECORD OF ALL TEACHING EXPERIENCE (MOST RECENT FIRST) <sup>1</sup>							
Title ,Full-Time / Part-Time	Name and Address of School /Child Care Centre	Ages Taught	From/To (month/year required)	Salary/ Wage	Main Duties	Reason for Leaving	
						i	

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 $<sup>^{\</sup>rm 1}$  Note that if you are a student, please provide details of any placements.

Title ,Full-Time / Part-Time		d Address aployer	From/To (month/year required)	Salary/ Wage	Main Duties	Reason for leaving
	TD 4 13 113	103				
School, College, University		Full-Time / Part-Time	From/To (month/year required)		Qualification, Subject, rade/Class	Date Obtained
ate any activities, lucational, sportin u have taken part	g or extra-	curricular, in v				
y musical instrum						
UPPORTING ST			experience that ma	ke you suitable for	this post.	

<sup>&</sup>lt;sup>2</sup> In addition to your teaching experience listed above, please provide **a FULL RECORD OF EMPLOYMENT** from the period you left school (if applicable). Please leave no unexplained gaps – include periods of unemployment, study, voluntary work, raising a family, part time work or multiple employments.

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<sup>&</sup>lt;sup>3</sup> Enter qualifications obtained and subjects passed with date in each case. If degree, state whether honours and give class and subjects.

VULNERABLE POLICE REFERENCE CHECK	
Have you recently performed a Vulnerable Sector Police Reference Check?	Yes / No
If you have answered YES above, please state the date and place of the Vulnerable Sector Police Reference Check.	

	Yes / No
If you have answered YES above, please state the date and place of the Vulnerable Sector Police Reference Check.	
REFERENCES	
Please give details of three employment and/or acade employer if applicable. References are not accepted fr	mic references, one of whom must be your present or most recent om relatives or friends writing solely in this capacity.
Reference 1	
Name:	
Position:	
Organisation:	
Phone:	
Email:	
Address including postal code:	
Reference 2	
Name:	
Position:	
Organisation:	
Phone:	
Email:	
Address including postal code:	
Reference 3	
Name:	
Position:	
Organisation:	
Phone:	
Email:	

wish for this to happen:

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#### WHERE YOU SAW THE JOB VACANCY ADVERTISED

Please state where you saw this job vacancy advertised:

#### **ADDITIONAL INFORMATION**

Do you have any medical conditions, physical or other limitations that would require any adjustments or accommodations in the workplace?	YES / NO
If you have answered YES above, please specify:	
Do you have a valid First Aid CPR certification?  If you have answered YES above, please state the expiry date:	YES / NO

## **RIGHT TO WORK IN CANADA**

Do you have the right to work in Canada?

### STATEMENT OF UNDERSTANDING AND CONSENT

I have applied to Educare Staffing Services Ltd. (the "Company") for employment. Part of the hiring process is an investigation into my background and of information I have provided. I hereby authorize, direct, and consent to the Company and/or its authorized agents to conduct investigations into my background. These investigations might include, but are not limited to searches for information about my record of criminal convictions, education records, professional certifications, personal character references, employment history and any other public information file in local, provincial or federal agencies that may be relevant to my employment with the Company.

I hereby consent to and understand that the Company will use the information collected pursuant to these investigations for the purposes of (if and as applicable) establishing, managing and terminating my employment, including without limitation, evaluating my employment application and suitability for ongoing employment, determining employment eligibility under the Company's employment policies, and otherwise as may be permitted or required by law.

I authorize, direct and consent to the release of records obtained through such investigations to the Company and/or its authorized agents for the purposes described above. In addition, I release and discharge the Company, its agents and affiliates, to the fullest extent permitted by law, from any claims, damages, losses, liabilities, costs, expenses or any other charge or complaint filed with any agency as a result of retrieving and reporting this information.

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understand that this disclosure and consent for obtaining a background report will also apply to any future updates a street on the company may conduct for the above purposes so long as I continue to be employed by the Company.	ate
have taken the time to read this document, fully understand it and voluntarily consent to the background investigation escribed herein. I certify that the contents of this application are, to the best of my knowledge and belief, a true statement.	
ignature:	
Date:	