



APPLICATION FOR CERTIFIED OCCASIONAL TEACHER

NAME: _____ EMAIL: _____

ADDRESS: _____

POSTAL CODE: _____ ONTARIO COLLEGE OF TEACHERS' REGISTRATION #: _____

TELEPHONE: (HOME) _____ (CELL) _____

Note: You may provide 2 numbers for your file. However, please check 1 (one) number to be used for call out purposes.

1. Please circle the days and times that you will be available for occasional work:

DAYS: EVERY DAY - **OR** - MON TUES WED THURS FRI
TIME: ALL DAY - **OR** - A.M. only P.M. only Other _____

2. Please check all classifications for which you wish to be called:

- | | | |
|--|--|--|
| <input type="checkbox"/> FSL Intermediate Elementary | <input type="checkbox"/> FSL Primary/Junior | <input type="checkbox"/> Junior/Intermediate |
| <input type="checkbox"/> FSL Intermediate Secondary/Senior | <input type="checkbox"/> FSL Primary/Junior/Intermediate | <input type="checkbox"/> Primary |
| <input type="checkbox"/> FSL Junior | <input type="checkbox"/> Intermediate Elementary | <input type="checkbox"/> Primary/Junior |
| <input type="checkbox"/> FSL Junior/Intermediate | <input type="checkbox"/> Intermediate Secondary/Senior | <input type="checkbox"/> Primary/Junior/Intermediate |
| <input type="checkbox"/> FSL Primary | <input type="checkbox"/> Junior | <input type="checkbox"/> Special Education |

3. Please list any FSL qualifications _____

4. Please check the schools where you wish to serve as an Occasional Teacher:

- | | | |
|---|--|--|
| <input type="checkbox"/> Pope Francis Elementary School | <input type="checkbox"/> Sacred Heart School - KL | <input type="checkbox"/> Aileen Wright School |
| <input type="checkbox"/> St. Joseph School | <input type="checkbox"/> St. Jerome School | <input type="checkbox"/> St. Anne School |
| <input type="checkbox"/> St. Paul School | <input type="checkbox"/> Holy Family School | <input type="checkbox"/> St. Patrick School - Kap. |
| <input type="checkbox"/> O'Gorman Intermediate School | <input type="checkbox"/> ECCS | <input type="checkbox"/> Bishop Belleau School – |
| <input type="checkbox"/> O'Gorman High School | <input type="checkbox"/> St. Patrick School - Cobalt | Moosonee |

Signature of Teacher

Date

IN ACCORDANCE WITH THE MUNICIPAL FREEDOM OF INFORMATION AND PROTECTION OF PRIVACY ACT, 1989,
THE INFORMATION WILL BE USED ONLY FOR THE PURPOSES FOR WHICH IT WAS COLLECTED.

Please submit application to hr@ncdsb.on.ca