

Huron-Superior Catholic District School Board



90 Ontario Avenue, Sault Ste. Marie, Ontario P6B 6G7

TELEPHONE: (705) 945-5400

FAX: (705) 945-5503

Dear Applicant:

Thank you for applying to the Huron Superior Catholic District School Board.

The following documentation package must be submitted to be considered for a teaching position:

Original Documents:

- Employment Teaching Application Form
- Resume and Covering Letter
- Faith Reference Form For Teacher Applicants

Copies of the Following Documents:

- Transcripts - University and College of Education
- Practice Teaching Reports AND/OR Recent Performance Review Reports
- Evidence of Completed OECTA Part 1, Religious Education Course
- QECO Statement of Evaluation - if evaluated
- Two Letters of Reference
- Certification of Registration - from the College of Teachers
- Certification of Qualification - from the College of Teachers
- Membership Card - from the College of Teachers
- Letter of Eligibility from the College of Teachers OR
- Interim Certificate of Qualification from the College of Teachers

The Board recognizes that acquiring documents from the Ontario College of Teachers might be delayed.

A candidate who has been interviewed and offered a position with this Board will also be required to submit :

- Evidence of a satisfactory tuberculin test dated within the last year.
- Evidence of a current criminal reference check, which may be obtained through your local Police Services.

For document information please contact:

The Ontario College of Teachers, Membership Services Dept.
121 Bloor Street East, 6th Floor, Toronto, ON M4W 3M5
Phone 1-888-534-2222 or (416) 961-8800 / Fax (416) 961-8822

For Q.E.C.O. information, please contact:

The Qualifications Evaluation Council of Ontario
1260 Bay Street, Toronto, ON M5R 2B9
Phone 1-800-385-1030 or (416) 323-1969

In compliance with the Freedom of Information and Protection of Privacy Act (1989), this information will be used when considering candidates for teaching positions.

Yours truly,

John Stadnyk
Director of Education

| RECORD OF EDUCATION | | YEARS ATTENDED | | |
|---------------------|------------------------|----------------|----|-----------------------|
| SCHOOL | SCHOOL/COURSE OF STUDY | FROM | TO | DEGREE AND/OR DIPLOMA |
| | | | | |
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| | | | | |
| | | | | |

| SPECIAL SKILLS AND TALENTS (e.g. Music, crafts etc.) |
|--|
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| |

| TEACHING AND OTHER WORK EXPERIENCE | | GRADE / ASSIGNMENT | SUPERVISOR / PRINCIPAL |
|------------------------------------|----------|--------------------|------------------------|
| Dates From | Dates To | | |
| | | | |
| | | | |
| | | | |
| | | | |

| REFERENCES: | | |
|---------------------|---------|---------------------|
| NAME AND OCCUPATION | ADDRESS | RELATIONSHIP TO YOU |
| | | |
| | | |
| | | |



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**AUTHORIZATION FOR RELEASE OF
INFORMATION FORM**

TO THE APPLICANT

**A PHOTOCOPY OF THIS SIGNED FORM WILL ACCOMPANY ALL REQUESTS FOR
REFERENCE**

I authorize the Huron Superior Catholic District School Board to obtain personal information from my present and/or previous employers and from any other persons I have listed as references to assist in determining my suitability, eligibility and qualifications for employment with the Board.

Signature of Applicant

Date

TO THE REFEREE

**You may assume that the information given about the above applicant will be held in confidence by the
Huron-Superior Catholic District School Board.**

Any questions concerning the collection of this information should be directed to the

**John Stadnyk, Director of Education
90 Ontario Avenue
Sault Ste. Marie, Ontario P6B 6G7
Telephone: (705) 945-5600**

CERTIFICATION

I certify that all statements made by me on this application for employment are true and correct to the best of my knowledge and belief and I understand that, if employed, any misrepresentation, falsification or omission of facts thereon may justify my dismissal.

Signature of Applicant

Date

Huron-Superior Catholic District School Board

Faith Reference Form

for

Teacher Applicants



