

APPLICATION FOR CERTIFIED OCCASIONAL TEACHING

NAME: _____ EMAIL: _____

ADDRESS: _____

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

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

PHONE: (HOME) _____ (CELL) _____

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

- | | | | |
|------------------------------------|----------------------------------|----------------------------------|----------------------------------|
| <input type="checkbox"/> MONDAY | <input type="checkbox"/> All Day | <input type="checkbox"/> AM Only | <input type="checkbox"/> PM Only |
| <input type="checkbox"/> TUESDAY | <input type="checkbox"/> All Day | <input type="checkbox"/> AM Only | <input type="checkbox"/> PM Only |
| <input type="checkbox"/> WEDNESDAY | <input type="checkbox"/> All Day | <input type="checkbox"/> AM Only | <input type="checkbox"/> PM Only |
| <input type="checkbox"/> THURSDAY | <input type="checkbox"/> All Day | <input type="checkbox"/> AM Only | <input type="checkbox"/> PM Only |
| <input type="checkbox"/> FRIDAY | <input type="checkbox"/> All Day | <input type="checkbox"/> AM Only | <input type="checkbox"/> PM Only |

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

- | | | |
|--|----------------------------------|------------------------------|
| <input type="checkbox"/> Primary | <input type="checkbox"/> English | <input type="checkbox"/> FSL |
| <input type="checkbox"/> Junior | <input type="checkbox"/> English | <input type="checkbox"/> FSL |
| <input type="checkbox"/> Intermediate | <input type="checkbox"/> English | <input type="checkbox"/> FSL |
| <input type="checkbox"/> Secondary/Senior | <input type="checkbox"/> English | <input type="checkbox"/> FSL |
| <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 | <input type="checkbox"/> Sacred Heart – Kirkland Lake | <input type="checkbox"/> Aileen Wright |
| <input type="checkbox"/> St. Joseph | <input type="checkbox"/> St. Jerome | <input type="checkbox"/> St. Anne |
| <input type="checkbox"/> O’Gorman Intermediate | <input type="checkbox"/> Holy Family | <input type="checkbox"/> St. Patrick-Kapuskasung |
| <input type="checkbox"/> Bishop Belleau- Moosonee | <input type="checkbox"/> English Catholic Central (ECCS) | <input type="checkbox"/> St. Patrick-Cobalt |
| <input type="checkbox"/> O’Gorman High School | <input type="checkbox"/> ACCESS | |

Signature of Teacher

Date