



INFORMATION REQUIRED FROM NEWLY HIRED TEACHERS

Name in Full:		Birth Date:*	
Address:	Box:	Street:	
	City:	Postal Code:	
E-Mail:	Phone:	Cell:	
University:	Degree(s)	Major/Minor	
A.T.C. #:	Permanent <input type="checkbox"/>	Interim <input type="checkbox"/>	Expiry Date:
S.I.N. #:	Receiving ATRF Pension? Yes <input type="checkbox"/> No <input type="checkbox"/>		
Years of Teaching Experience (Alberta): (List)			
	<u>Yrs</u>	<u>(School Division)</u>	
1.	_____	_____	
2.	_____	_____	
3.	_____	_____	
	<u>Yrs</u>	<u>(School Division)</u>	
4.	_____	_____	
5.	_____	_____	
6.	_____	_____	
Competition #:	School:		

* Required for certification.

Documentation Required

The following documentation **must** be received at Central Office prior to teaching in a classroom:

- ⇒ Photocopy of your current Alberta Teaching Certificate. *If you are a new graduate and have not received your Alberta Teaching Certificate, please notify us to have a Temporary Letter of Authority issued.*
- ⇒ Signed copy of Conditional Job Offer.
- ⇒ Criminal Record Check from R.C.M.P. (see Conditional Job Offer)
- ⇒ Staff Information Gathering and Consent Form (FOIPP).

If any of the following documents have not been submitted with your application for this position, they **must** be included with this form so that your file is complete:

- ⇒ Up-to-date copy of your resume.
- ⇒ All Student Teacher Reports and Ratings by Cooperating Teachers (New Teachers).
- ⇒ Official Transcripts (contact your University if you do not have a copy).
- ⇒ Superintendent and Principal Reports on Teaching (Experienced Teachers).
- ⇒ Original Copy of Teachers' Qualification Service Evaluation (Years of Training). *If you do not have a copy, you must apply to the Alberta Teachers' Association. An application form is available on their web site: www.teachers.ab.ca. Click on Teacher Salary Qualifications.*
- ⇒ Certification of Teaching Experience. Attached form is to be sent to former employers to be completed and forwarded.
- ⇒ Direct Deposit Registration/Change Form or Void Cheque. (Also used for reimbursement claims.)
- ⇒ Statement from Physician re Medical Condition (see Conditional Job Offer).

Please date and sign this form below and **return it to Olwyn Buckland**, EA / Human Resources Assistant, Livingstone Range School Division No. 68, P.O. Box 69, Claresholm, Alberta T0L 0T0. Thank you.

Signature: _____ Date: _____