

Archdiocese of Winnipeg / Catholic Schools Commission

**Substitute Teacher Application Form**

(please print)

I, \_\_\_\_\_, hereby apply to the Archdiocese of Winnipeg and the Catholic Schools Commission to have my name appear on the list of Substitute Teachers supplied to the principals of their schools.

Please check:  Mr.  Ms.  Mrs. Other: \_\_\_\_\_

Name \_\_\_\_\_  
*Surname First Name Middle Name Nee (if applicable)*

Address \_\_\_\_\_

City/Town \_\_\_\_\_ Postal Code \_\_\_\_\_

Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_ Cell \_\_\_\_\_

E-mail \_\_\_\_\_ Social Insurance # \_\_\_\_\_

Please check: Religion:  R.C.  Ukr.C. Other: \_\_\_\_\_

Manitoba Teachers Certificate # \_\_\_\_\_ P.S.P. # \_\_\_\_\_

Teaching Classification (Class) \_\_\_\_\_

Qualified Years Teaching Experience as of June 30, 2009 \_\_\_\_\_ Years

Grade Preference: (please check (✓) one):

K-4  K-6  K-8  5-8  
 K-12  7-12  9-12

Please list subject area preferences (teachable subjects):

\_\_\_\_\_  
\_\_\_\_\_

Are you seeking a full time teaching position?  Yes  No

Additional Information \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Date \_\_\_\_\_ Signature \_\_\_\_\_