

Occasional Teacher List 2022-2023 Application

408 Wembley Drive, Sudbury, Ontario P3E 1P2 | Tel: 705.674.3171 | Toll Free: 1.888.421.2661 | rainbowschools.ca

Name:		First		Middle
Lasi		LII2f		Middle
Telephone:		Alternate Telephone:		
Email Address:				
Mailing Address:				
#	Street	Apt.	City	Postal Code
Please complete the	following:			
Have you previously	worked for the RDS	SB? □Yes □ No		
-		cher List during the 202	21-2022 school year?	□Yes □ No
Are you currently on	a RDSB recall list?	□Yes □ No	•	
(If yes, please fax a copy of this a Are you a retired tead				
Ale you a relifed lead		103 - 110		
Do you have French	Language Skills su	fficient to teach: \Box (Core French	ench Immersion
Please indicate which ☐ Elementary Panel Must have Primary, Junior or Inte	(JK – Grade 8)	applying to teach in: Secondary Pan Must have Intermediate or Se	` ,	
Basic Qualifications:				
☐ Primary				
☐ Junior				
☐ Senior – teachable	e subjects:			
Additional Qualification	ons:			
What areas of the RD				
☐ Sudbury and area	☐ Espano	la □ Manitou	ılin Island	

Please refer to our Directory of Schools (found on our website www.rainbowschools.ca/schools/directory-of-schools) for locations

Please complete the following if you have worked for anoth	ner School Board:
Name of School Board:	
Years Worked:Name of Principal:	Contact Number:
Name of School Board:	
Years Worked:	
Name of Principal:	Contact Number:
Name of School Board:	
Years Worked:	
Years Worked:Name of Principal:	Contact Number:
Are there any restrictions on your availability? \Box Yes \Box N	0
For employment references, may we contact: Your current/most recent employer? □Yes □ No Your former employers? □Yes □ No	
You must submit all of the documents listed below with this If you have not completed a document, please explain why Cover Letter and Resume Employment References (name and contact information 2022 Ontario College of Teachers Certificate of Qualific Letters of Recommendation Practice Teaching Reports and/or Performance Apprais Appendix B – New Teacher Declaration Form Criminal Background Check/Vulnerable Sector Screening	n for three professional references) ation and Registration
I hearby declare that the following information is true and on history. I understand that a false statement may disqualify	
Signature	Date