

## Lloydminster Catholic School Division 6611B – 39 Street, Lloydminster, AB T9V 2Z4

## **APPLICATION FOR SUBSTITUTE TEACHING POSITION**

Name:	Maiden Name:
Present Address:	
	(Postal Code)
Phone Number:	Religion:
Cell Number:	Social Insurance Number:
<b>Teaching Certificate:</b> (Please e Type:	
Number:	Valid To:
SPTRB Certified Date:	Copy enclosed: Yes / No
submitted before placement of Education:  Major:	Sector Check and VOID Cheque or Banking Information documents must be
	(i.e. French Immersion):
Grades Preferred:	
Are you a Superannuated (Ret	ired) Teacher?
I hereby acknowledge th	at my information will be submitted to STF as a sub teacher.
Date: Please attach resume.	Signature of Applicant:
APPROVED BY:	DATE APPROVED: