



# Lloydminster Catholic School Division

6611B-39 Street, Lloydminster, Alberta T9V 2Z4

## APPLICATION FOR SUBSTITUTE EDUCATIONAL ASSISTANT

Name: \_\_\_\_\_

Present Address: \_\_\_\_\_

\_\_\_\_\_  
(POSTAL CODE)

Phone Number: \_\_\_\_\_ Email Address: \_\_\_\_\_

Cell Number: \_\_\_\_\_

Roman Catholic: Yes \_\_\_\_\_ No \_\_\_\_\_ Social Insurance # \_\_\_\_\_

**NOTE:**

*A Criminal Record Check/Vulnerable Sector is requirement for employment and VOID Cheque or Banking Information documents must be submitted before placement on the substitute list. Provided: \_\_\_\_\_ Forthcoming: \_\_\_\_\_*

Date Available: \_\_\_\_\_

Programming: English: \_\_\_\_\_ French Immersion: \_\_\_\_\_

Present or last employer: \_\_\_\_\_

Training/Education: \_\_\_\_\_

Experience: \_\_\_\_\_

Grades Preferred: \_\_\_\_\_

Special Interests/Abilities: \_\_\_\_\_

References: \_\_\_\_\_

SIGNATURE OF APPLICANT: \_\_\_\_\_

*Please attach resume.*

APPROVED BY: \_\_\_\_\_ DATE APPROVED: \_\_\_\_\_