

APPLICATION FORM FOR TEACHING POSITION

Pers	onal Information					
	First Name:			Last name:		
	Telephone No.:			Cell:		
	Email address:					
	Date of birth:					
	Nationality:	☐ Canadian o	itizen 🗌 Pern	nanent resident	☐ Other ☐	
Edu	cation					
	Diploma:			Date obtained	/ in process	
	University:			Date obtained	/ in process	
	Specialisation:			Date obtained	/ in process	
Refe	rences Name two Last name / First n		confirm your compe	etence : Telephone #	Email :	address
1.						
2.						
Avai	lable date to begi	n working				
Subj	ects that you can	teach (F = in Fr	ench/ E = in English)	:		
	☐ French	☐ English	☐ Math-E	☐ Math-F	Sciences-E	☐Sciences-F

Employer	Job /	Work	Location		From	То	
o what level :	are you able to teach	·?					
Math	☐ Elementary ☐	Secondary CS1	T/TS/SN ☐ C€	gep pr-Calculu	us 🗌 (Cegep Calculus I/	
	☐ Cegep Calculus	III 🗆 Ce	gep Linear algebr	a [University	(ODE,)	
Physics	☐ Secondary	3: Electricity	& Magnestism				
	☐ Cegep NYC : Wa	;	☐ University				
Chemistry	☐ Secondary	☐ Cegep I/II	☐ Cegep Orga	nic chemistry	□Un	iversity	
Biology	☐ Sec. 3 & 4	Sec. 5	☐ Cegep	☐ Univer	sity		
French	\Box Elementary	☐ Secondary	☐ Cegep	☐ French	n as a second	l language	
English	☐ Elementary	☐ Secondary	☐ Cegep	☐ English	as a second	language	
l in the follo	ving table to indicate	e your availabili	ty of time and l	ocation to te	ach:		
Brossard	☐ Wed. 16h30~2		☐ Fri. 16h30~20		Sun. 9h	00~14h00	
Dorval	☐ Tues. 16h30~19h30		☐ Thurs. 16h30~19h30			☐ Sat. 9h30~18h30	