

School Year
20_____ - 20_____

☐ Substitute Support Staff
☐ Certified Substitute Teacher

Legal Name:	First	Middle	Surname
Full Mailing Address:	Box/Street	Town	Postal Code
Preferred phone number:	☐ Cell ☐ Home	Secondary phone number:	☐ Cell ☐ Home
Email Address:			

	I am willing to work at:	
✓	School (Grades taught)	Location
	All Schools	
	Ecole Routhier (K-6)	Falher
	G.P. Vanier (7-12)	Donnelly
	H.P. Elementary (K-6)	High Prairie
	Prairie River (7-9)	High Prairie
	E.W. Pratt (10-12)	High Prairie
	Prairie View Outreach (7-12)	High Prairie
	Joussard (K-6)	Joussard
	Kinuso (K-12)	Kinuso
	C.J. Schurter (K-3)	Slave Lake
	E.G. Wahlstrom (4-6)	Slave Lake
	Roland Michener (7-12)	Slave Lake
	Lakeside Outreach (7-12)	Slave Lake

	I am willing to work with:
✓	Grade(s)
	All Grades
	K
	1
	2
	3
	4
	5
	6
	7
	8
	9
	10
	11
	12

As a Certified Teacher, I am willing to teach:			
✓	Subjects		
	All Subjects		
	English/L.A.		Drama
	Math		Art
	Social Studies		Music
	Science		Band
	Biology		Technology/Computers
	Chemistry		Business Education
	Physics		Cosmetology
	French (2 nd Language)		Cooking
	French Immersion		Sewing
	Cree (2 nd Language)		Industrial Arts/Shop
	Inclusive Education		Outdoor Education
	Physical Education		Indigenous Education

I acknowledge that as per Appendix 400A - Criminal Record and Vulnerable Sector Check, I must advise The High Prairie School Division immediately upon being charged with, or convicted of, an offense under the Criminal Code of Canada and/or the Controlled Drugs and Substances Act.

I, _____, declare that there has been no change in the status
(please print name)
of my last Criminal Record Check and/or Declaration of Status that was provided to High Prairie School Division.

Signature:

Date:

Please return this form to High Prairie School Division by dropping off at any HPSD school or by mailing to Box 870, High Prairie, AB T0G 1E0
Inquiries: Please email HR@hpsd.ca or Call 780-523-3337