



Medicine Hat Catholic Board of Education

1251 — 1st Avenue SW, Medicine Hat, AB T1A 8B4
Phone: 403-527-2292 | www.mhcbe.ab.ca | Fax: 403-529-0917

TEACHER APPLICATION FORM

This application is for (please check):

Full-Time

Part-Time

Substitute

Please indicate competition number (if applicable): _____

Name of Position: _____

How did you hear about this position?

Search Engine (Google, Safari, Yahoo, etc.)

Recommended by friend or colleague

Social Media (Facebook, Instagram, Twitter)

Career Fair

Job Board (MHCBE website, Indeed, LinkedIn, Billboard)

Other: _____

Information for Applicants

MOTTO

Showing the face of Christ to all.

MISSION STATEMENT

In partnership with family, church and community, we provide Catholic education of the highest quality to our students.

VISION STATEMENT

- A gospel-centered community committed to:
- Learning excellence
- Christian service
- Living Christ

CONDITIONS OF EMPLOYMENT DOCUMENTATION

Valid Alberta Teaching Certificate

Teacher Qualifications Service (TQS)

Resume

Application Form

Social Insurance Number

Police Information Check (including Vulnerable Sector Search)

Intervention Record Check

Financial Institution Direct Deposit Form/Void Cheque

TD1 Provincial and Federal Forms

Current Pastoral Reference (Catholic or non-Catholic)

References (supervisors preferred)

PERSONAL INFORMATION

Date of Application: _____

Name in Full: _____

Maiden Name: _____

Mailing Address (Street, City, Province, Postal Code)

Primary Phone: _____

Alternate Phone: _____

Language(s) spoken other than English: _____

Are you a member of the Catholic faith?

Yes

No

EDUCATION

College/University: _____

Degree(s): _____

Years Attended: _____ Major: _____ Minor: _____

Alberta Teaching Certificate Number: _____

Out of Province Teaching Certificate (indicate Province and Certificate Number): _____

Indicate Areas of Special Training or Experience:

Special Ed Music Computer Studies Drama

Counselling Business Industrial Arts Art

Religious Ed Second Languages: _____ Other: _____

Please describe:

TECHNICAL SKILLS

Microsoft Office Suite (Word, Excel, One Drive, Teams, etc.) PowerSchool

Google Suite (Docs, Sheets, Drive, Gmail, etc.) Keyboarding Interactive Boards

Other Technical Skills (please describe): _____

PROFESSIONAL TEACHING EXPERIENCE

| School | Grades Taught | Dates | Teacher/Principal Information |
|--------|---------------|-------|-------------------------------|
| | | | |
| | | | |
| | | | |
| | | | |

OTHER EMPLOYMENT EXPERIENCE

| Year | Position Held | Employer | Contact Information for Direct Supervisor |
|------|---------------|----------|---|
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| | | | |
| | | | |
| | | | |

PREFERRED TEACHING POSITION:

(Indicate grade preference and subject preference)

Elementary (Grades 1-3) _____

Upper Elementary (Grades 4-6) _____

Junior High (Grades 7-9) _____

Senior High (Grades 10-12) _____

AREAS OF SPECIALIZED TRAINING/VOLUNTEER EXPERIENCE/RELEVANT COMMUNITY INVOLVEMENT

TEACHER RESPONSIBILITIES IN THE MEDICINE HAT CATHOLIC BOARD OF EDUCATION

In addition to responsibilities described in Section 196 of the Education Act the following responsibilities are requisite:

To model a faithful, Catholic life for students in the division

To respect and teach the doctrines of the Catholic church and the mandates of the local Bishop

GENERAL STATEMENT OF FAITH

As part of a commitment to Catholic education for the students of the Medicine Hat Catholic Board of Education, and as a condition of your employment, an individual taking employment with the Division will undertake to follow, both in and out of your employment with the Division, a lifestyle and deportment in harmony with Catholic teaching and principles which include, among other things, living in harmony with the principles of the gospel and teachings of the Catholic church.

(Signature of Applicant)

REFERENCES

Please complete the following forms:

[Reference Release Form](#)

[Pastoral Reference Form](#)

DECLARATION

If you have been convicted of any offence against the Criminal Code or statutes or regulations it is your duty to make the nature of this conviction known to the Division. Any statements given in this regard will be treated as strictly confidential.

I certify the statements made by me in this application are true and complete to the best of my knowledge and beliefs and are made in good faith. I understand if any of these statements are untrue this application may be rejected and that my appointment to a position may be rescinded. I further understand that I will respect the teachings and traditions of the Catholic church.

(Signature of Applicant)

Please return the signed and completed application form, the required conditions of employment documentation, a cover letter with resume, completed reference form and pastoral form to: Human Resources, Medicine Hat Catholic Board of Education 1251 – 1st Avenue S.W. Application forms will be retained for six months.