



Surrey Teachers' Association

Providing Educational Leadership

JOB SHARING INFORMATION FORM

The STA office would like to keep an information file for teachers interested in job sharing. If you are interested in sharing an assignment, please fill in the form below and return it to the STA office as soon as possible. THE FILE WILL BE KEPT AT THE STA OFFICE TO HELP IN YOUR SEARCH FOR A POSSIBLE TEACHING PARTNER. Please be aware that this is open for our members to use. It is not a confidential file. Periodically, a list is compiled from these files and distributed to schools.

NAME: _____ HOME PHONE _____

ADDRESS: _____ CITY _____ POSTALCODE _____

EMAIL ADDRESS _____

CURRENT SCHOOL _____

CURRENT ASSIGNMENT AND ENTITLEMENT % _____

YEARS OF EXPERIENCE _____ in Surrey In other districts _____

GRADE LEVELS YOU HAVE TAUGHT _____

GRADE LEVEL and/or SUBJECTS YOU WISH TO TEACH _____

WHAT PERCENTAGE(S) WOULD YOU LIKE TO WORK? _____

WOULD YOU BE WILLING TO CHANGE SCHOOLS TO FORM A JOB-SHARING ASSIGNMENT? _____

WOULD YOU BE PREPARED TO SUBSTITUTE FOR YOUR JOB SHARING PARTNER? _____

HAVE YOU JOB SHARED BEFORE? YES / NO IF YES, FOR HOW LONG? _____

TYPE OF JOB SHARING ASSIGNMENT DESIRE:

Half-year full time Half-week for a full year Half-day for a full year

Other
