

SCHOOL DISTRICT 36 (SURREY)

**REQUEST FOR AN EVALUATION FOR POSITIONS REQUIRING
SPECIAL TRAINING OR SPECIFIC EXPERIENCE**

EVALUATION REQUESTED FOR POSITION AS:

See JOB DESCRIPTION HANDBOOK - page ()

A. PERSONAL INFORMATION

Miss / Mrs. / Ms. / Mr. / Dr.

Surname

Given Name, Initials

() -

Home Telephone

Employee Number

School Name

Courier #

NOTE: Your application will only be processed if accompanied by supporting documentation.

B. MINIMUM ACADEMIC QUALIFICATIONS / EXPERIENCE:

(Please check the current Job Description Handbook and attach university transcripts. Where relevant coursework differs, please provide official course descriptions.) (Please highlight relevant courses)

C. PREFERRED QUALIFICATIONS / EXPERIENCE:

(Use reverse side if necessary)

D. OTHER RELEVANT INFORMATION:

(Use reverse side if necessary)

E. FOR OFFICE USE ONLY:

<input type="checkbox"/>
<input type="checkbox"/>

QUALIFIED

NOT QUALIFIED

REASON

Signature:

Date:

Learner Support Team Teacher

See Job Description Handbook (Pages 15-16)

A: PERSONAL INFORMATION:

Surname _____

Preferred Name, Initials _____

Employee Number _____

Phone Number _____

School Name _____

Courier Number _____

NOTE: Your application will only be processed if accompanied by supporting documentation.**B: MINIMUM ACADEMIC QUALIFICATIONS/EXPERIENCE:**

Please check the current Job Description Handbook and **attach university transcripts** with **relevant courses** highlighted.
Please include **official course descriptions**.

- ☐ Bachelor of Education degree or equivalent
☐ Valid BC Teaching Certificate
☐ Minimum of two (2) years successful classroom teaching

Four Post Practicum Courses to include: (courses cannot be applied to more than one category)

1. One course or equivalent senior level (300 or higher) in Assessment and Evaluation of Student Learning Institution: _____
Course # _____

2. One course or equivalent senior level (300 or higher) in Differentiated Instruction Institution: _____
OR Inclusive Teaching Practices Course # _____

3. One course or equivalent senior level (300 or higher) from list A (see below)
Institution: _____
Course #: _____

List A:

- Behaviour Disorders
- Designs for learning: Reading/ Mathematics
- Identification, Assessment and Support of Learning Disabled Learners
- Introduction to Exceptional Children
- Teaching the Atypical Learner
- Teaching Thinking/Learning Strategies

4. One course or equivalent senior level (300 or higher) from list B (see below)
Institution: _____
Course #: _____

List B:

- Curriculum and Instruction in Teaching ESL
- ESL Literacy Instruction
- Language Development
- Second Language Acquisition
- Supporting the ESL Learners across the Curriculum

C. PREFERRED QUALIFICATIONS/EXPERIENCE:

- ☐ Completion, or near completion, of a Master's degree in Special Education, ESL and/or Curriculum and Instruction
☐ Completion, or near completion, of a diploma in English as a Second Language Instruction, or Special Education

D. OTHER RELEVANT INFORMATION:

(use reverse side if necessary)

E. FOR OFFICE USE ONLY:

- ☐ Qualified
☐ Not Qualified

Reason: _____

Signature: _____ Date: _____

SCHOOL DISTRICT 36 (SURREY)
REQUEST FOR AN EVALUATION FOR POSITIONS REQUIRING
SPECIAL TRAINING OR SPECIFIC EXPERIENCE

BASES TEACHER (Secondary)
See *JOB DESCRIPTION HANDBOOK*

A. PERSONAL INFORMATION:

_____ Miss / Mrs. / Ms. / Mr. / Dr.
Surname Preferred Name, Initials
 () -

Home Telephone Employee Number

<i>School Name</i>	<i>Courier #</i>
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NOTE: *Your application will only be processed if accompanied by supporting documentation.*

B. MINIMUM ACADEMIC QUALIFICATIONS / EXPERIENCE:

(Please check the current Job Description Handbook and attach university transcripts. Where relevant coursework, differ, please provide official course description.) (Please highlight relevant courses)

- | | |
|--|---|
| | Valid B.C. Teaching Certificate; |
| | Minimum three (3) years satisfactory teaching experience; |
| | Completion of a Diploma in Inclusive/Special Education or equivalent with emphases on developmental disabilities (low incidence). |

C. PREFERRED QUALIFICATIONS/EXPERIENCE:

- | | |
|--|---|
| | Satisfactory teaching experience of students with intellectual disabilities; |
| | Participation in workshops/conferences/coursework regarding emerging trends in Inclusive Education; |
| | Completion of Diploma or Master's degree in Inclusive/Special Education or equivalent. |

D. OTHER RELEVANT INFORMATION: (Use reverse side if necessary.)

E. FOR OFFICE USE ONLY:

- | | | | |
|--------------------------|---------------|--------|--|
| <input type="checkbox"/> | QUALIFIED | REASON | |
| <input type="checkbox"/> | NOT QUALIFIED | | |

Signature: _____

Date: _____

School District #36 (Surrey)
Request for an Evaluation for Positions Requiring Special Training or Specific Experience

Teacher-Librarian

See Job Description Handbook

A: PERSONAL INFORMATION:

Surname

Preferred Name, Initials

Employee Number

Phone Number

School Name

Courier Number

NOTE: Your application will only be processed if accompanied by supporting documentation.

B: MINIMUM ACADEMIC QUALIFICATIONS/EXPERIENCE:

Please check the current Job Description Handbook and **attach university transcripts** with **relevant courses** highlighted. Where relevant coursework differs, please provide official course descriptions.

- ☐ Bachelor of Education Degree or equivalent
- ☐ Valid B.C. Teaching Certificate
- ☐ 5 senior level (300 or higher) Teacher-Librarian courses
- ☐ Minimum of two (2) years satisfactory classroom teaching experience

C. PREFERRED QUALIFICATIONS/EXPERIENCE:

- ☐ Diploma or Master's degree in Teacher-Librarianship

D. OTHER RELEVANT INFORMATION: (use reverse side if necessary)

E. FOR OFFICE USE ONLY:

- ☐ Qualified
- ☐ Not Qualified

Reason: _____

Signature: _____ Date: _____

SCHOOL DISTRICT 36 (SURREY)
REQUEST FOR AN EVALUATION FOR POSITIONS REQUIRING
SPECIAL TRAINING OR SPECIFIC EXPERIENCE

ELEMENTARY CORE MUSIC TEACHER

See JOB DESCRIPTION HANDBOOK

A. PERSONAL INFORMATION

_____ Miss / Mrs. / Ms. / Mr. / Dr.
Surname Given Name, Initials
() - _____

Employee Number

School Name Courier #

NOTE: Your application will only be processed if accompanied by supporting documentation.

B. MINIMUM ACADEMIC QUALIFICATIONS / EXPERIENCE:

(Please check the current Job Description Handbook and attach university transcripts. Where relevant coursework differs, please provide official course description.) (Please highlight relevant courses)

☐ Valid B.C. Teaching Certificate;
☐ Courses in music methodology; Instructor's Name: _____
☐ Levels courses in:
☐ ORFF Instructor's Name: _____
☐ KODALY Instructor's Name: _____
☐ Education through Music Instructor's Name: _____
☐ Satisfactory practicum / teaching experience in Primary Education;
☐ Proficiency on instruments related to core music program.

PREFERRED QUALIFICATIONS / EXPERIENCE:

☐ Music keyboard skills; Level of Proficiency: _____
☐ Specialization in music education.

C. OTHER RELEVANT INFORMATION:

(use reverse side if necessary)

D. FOR OFFICE USE ONLY:

☐ QUALIFIED REASON _____
☐ NOT QUALIFIED

Signature _____ Date _____