

BCTF PEER SUPPORT SERVICES APPLICATION FORM

NAME	EMAIL
HOME ADDRESS	
CITY/TOWN	POSTAL CODE
HOME PH	
SCHOOL NAME/PLACE OF WORK	
WORK PH	
CURRENT TEACHING ASSIGNMENT	
LOCAL	

- Aboriginal Ancestry
 I am able to provide Peer Support in French.
 Member of an equity seeking group
- I agree to attend the Peer Support training session to be determined as a new appointee.
- I agree to attend future Peer support meetings held in the Fall (date TBD).

***New appointees must be available to attend the training session and all PSS meeting dates.**

TEACHING EXPERIENCE (list most recent experience first)

School	Grade level(s) / Subjects(s)	Dates/years

ACADEMIC QUALIFICATIONS

Degree	Year	University	Major field(s)	Minor field(s)

Other relevant education or training;

RECENT AND CURRENT BCTF/LOCAL INVOLVEMENT (i.e. BCTF advisory committees, other BCTF service, BCTF facilitators, local union roles, etc.)

SPECIFY HOW YOU MEET THE CRITERIA AS OUTLINED IN THE POSTING

REFERENCES Submit the names of two references (BCTF members preferred)

NAME

POSITION

PHONE

ADDRESS

NAME

POSITION

PHONE

ADDRESS

NOTE:

To be considered, all applicants must complete this application form and return it to Sherry Payne
spayne@bctf.ca or by **June 4, 2021**