

JUNE MARKING BOARD APPLICATION (2007)

PERSONAL INFORMATION

Name _____	SIN _____
Residential Address _____	School Name _____
_____	District # _____
_____	School Location _____
Home Phone _____	_____

PROFESSIONAL INFORMATION

Previous Years on Marking Board June 2002 <input type="checkbox"/> 2003 <input type="checkbox"/> 2004 <input type="checkbox"/> 2005 <input type="checkbox"/> 2006 <input type="checkbox"/> Teaching Certificate Held: _____ Total Years full-time Teaching: _____	Degrees Held 1 st 2 nd 3 rd	Degree Major Minor	_____ _____ _____
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Course	No. of University Courses Completed in Subject Area	No. of Years Teaching the Course			Would like to serve on the Marking Board as...	
		This Year (Yes/No)	Previous Years	Total	Marker?	Chief Marker?
Biology 3201					<input type="checkbox"/> Yes	<input type="checkbox"/> Yes
Chemistry 3202					<input type="checkbox"/> Yes	<input type="checkbox"/> Yes
Earth Systems 3209					<input type="checkbox"/> Yes	<input type="checkbox"/> Yes
Physics 3204					<input type="checkbox"/> Yes	<input type="checkbox"/> Yes
Mathematics 3204					<input type="checkbox"/> Yes	<input type="checkbox"/> Yes
Mathematics 3205					<input type="checkbox"/> Yes	<input type="checkbox"/> Yes
English 3201 (9 day marking board)					<input type="checkbox"/> Yes	<input type="checkbox"/> Yes
French 3200					<input type="checkbox"/> Yes	<input type="checkbox"/> Yes
Français 3202					<input type="checkbox"/> Yes	<input type="checkbox"/> Yes
World Geography 3202					<input type="checkbox"/> Yes	<input type="checkbox"/> Yes
World History 3201					<input type="checkbox"/> Yes	<input type="checkbox"/> Yes
(Histoire mondiale 3231)					<input type="checkbox"/> Yes	

REFERENCES

Present Principal _____	Phone _____
Other Reference _____	Phone _____
Other Reference _____	Phone _____

IMPORTANT NOTES:

1. Marking Board will run for **EIGHT (8) days** (Tuesday, June 26th to Wednesday, July 4th) (Note English 3201 marking board will run one extra day (i.e., finishing on Thursday, July 5th))
2. **Rate of pay = \$211.54 per day**
3. Expenses incurred for one round trip between St. John's and your residential address will be reimbursed at regular government rates.
4. Completed applications should reach the High School Certification Office by **APRIL 5th**. Department of Education, Confederation Building, 3rd Floor, P.O. Box 8700, St. John's, NL, A1B 4J6, Fax: 709-729-0611.

I hereby certify that the information given above is correct to the best of my knowledge:

Signature

Date