



POSTED: May 15, 2019  
DEADLINE: 12 Noon, May 23, 2019

**Application for Teaching**  
**Exploring Family Studies (HIF101)**

Credit Course for Grade 8 Students

**Program Dates:** July 2 through August 9, 2019

**Program Hours/Days:** 9:00 am - 1:00 pm, Monday - Friday

**Location:** York University

The Toronto District School Board adheres to equitable hiring, employment and promotion practices.

*The Toronto District School Board invites applications from qualified teachers to teach Exploring Family Studies (HIF101) to Grade 8 students from Oakdale Middle School and Brookview Middle School who will be attending Westview Centennial Secondary School in September 2019, many of whom are achieving below Level 1 in English, Math and Science. Teachers are selected based upon subject qualifications related to the delivery of the course, their commitment to teaching in a collaborative environment, and their knowledge of a practice of inclusivity that encourages all students to achieve their potential academically and socially. Familiarity with the community is an asset.*

- **E-mail completed applications, with a copy of your resumé and a copy of your OCT Certificate of Qualification, to:**  
[ConEdApplications@tdsb.on.ca](mailto:ConEdApplications@tdsb.on.ca)
- Deadline for applications: **12:00 Noon, May 23, 2019**
- Please quote "Exploring Family Studies" in the subject line.
- Incomplete applications will not be considered.
- Individual applications cannot be acknowledged. Applicants may request a delivery receipt when emailing application.
- Candidates selected for an interview will be contacted by telephone or email.

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**Personal Information - Please Print**

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_  
Street No. \_\_\_\_\_ Apt. \_\_\_\_\_ Street Name: \_\_\_\_\_  
City: \_\_\_\_\_ Province: \_\_\_\_\_ Postal Code \_\_\_\_\_  
Home Telephone No. \_\_\_\_\_ - \_\_\_\_\_ Business Telephone No. \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_  
Cell Phone: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Email address: \_\_\_\_\_  
Current School \_\_\_\_\_ TDSB Employee Number \_\_\_\_\_

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**Certification:** ☐ Certificate of Qualification OR ☐ Interim Certificate of Qualification

Ontario College of Teachers (Current Issue Date): \_\_\_\_/\_\_\_\_/\_\_\_\_ (dd/mm/yy) Registration Number: \_\_\_\_\_

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**References (Referees must be Principals or Vice-Principals)**

Name	Position	School / Organization	Telephone Number
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***We strive to meet the accommodation needs of persons with disabilities. Applicants are encouraged to make their needs for accommodation known in advance during the application process.***