Application to Join the Association Professional Development Corps

Please check the Corps to which you are submitting your application from the choices below.

Association Instructor and Association Administrator Instructor Corps

Terra Kaliszuk
Executive Staff Officer
Professional Development
The Alberta Teachers' Association
11010 142 Street

Edmonton, AB T5N 2R1 or Terra.Kaliszuk@ata.ab.ca

Indigenous Education
Professional Development
Facilitator Corps

Melissa Bird
Executive Staff Officer
Professional Development
The Alberta Teachers' Association
11010 142 Street

Edmonton, AB, T5N 2R1 or Melissa.Purcell@ata.ab.ca

Professional Development Facilitator Corps

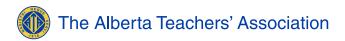
Dan Grassick
Executive Staff Officer
Professional Development
The Alberta Teachers' Association
11010 142 Street

Edmonton, AB, T5N 2R1 or Dan.Grassick@ata.ab.ca

Please send or e-mail this application form, along with your letter of interest and resume, to the specific contact noted above.

This information is collected pursuant to the Personal Information Protection Act of Alberta and will be used to assist in the selection of Association instructors. Should you have any questions regarding the Association's collection, use or disclosure of personal information, please contact the ATA Privacy Officer at 780-447-9400.

Name*				
Mailing Address*				
Street				
City/Town		Postal Code		
E-mail*				
Home Phone Number*				
School Phone Number				
School				
Name				
Street				
City/Town		Postal Code		
Name of School Principal				
School Board				
Board Office Mailing Address				
Street				
City/Town		Postal Code		
Name of Superintendant and Mailing Address				
Name				
Street				
City/Town		Postal Code		



Academic Credentials					
Other Credentials or Highlights					
Teaching Experience* (Indicate grade levels and courses/subjects taught)					
Language(s) Spoken Fluently*					
Language(s) Written Fluently*					
Names and contact information of two professional references (include information below)*					
1.	Name	2.	2. Name		
	School		School		
	Position		Position		
	Phone Number		Phone Number		
	Professional Relationship		Professional Relationship		
	Date(s) of Most Recent Work Together		Date(s) of Most Recent Work Together		
Eligibility for Service*					
Are you an active or associate ATA member in good standing? Yes No Unsure (If unsure, please contact the ATA's Membership Services at 1-800-232-7208)					
	ve you ever been disciplined by a current or past employer? es, please provide date and details:	Yes	res No		
	ve you ever been disciplined by a current or past regulatory bod es, please provide date and details:	y?	Y? Yes No		
Δre	a you currently under investigation for alleged professional misco	ndı	nduct or professional practice? Ves No		

*Required Fields



If yes, please provide date and details: