



SEVEN OAKS  
SCHOOL DIVISION  
*community begins here*

# SEVEN OAKS SCHOOL DIVISION

## APPLICATION FOR COMMUNITY-BASED ABORIGINAL TEACHER EDUCATION PROGRAM CATEP

Date: \_\_\_\_\_

### A. PERSONAL DATA

#### 1. NAME (Please Print)

Surname	Given Names

#### 2. PRESENT ADDRESS:

No. Street	City/Town	Prov.	Postal Code

Telephone:	
Residence	Business or Message

Cell	E-Mail Address

#### 3. INDIGEOUS ANCESTRY (please attached proof of ancestry)

\_\_\_\_\_ First Nation      \_\_\_\_\_ Métis      \_\_\_\_\_ Inuit  
(please select one of the following)

4. Language spoken: Cree \_\_\_\_\_ Ojibwe \_\_\_\_\_ Other \_\_\_\_\_

### B. EDUCATIONAL HISTORY

Diploma/Degree	School/University	Year Completed

★ **Please attach transcripts (secondary & post secondary),  
relevant certificates and diplomas to application form** ★

Are you currently on probation from any university?  Yes  No

Will you receive funding from your Band? \_\_\_\_\_ If so, which Band? \_\_\_\_\_

**C. EMPLOYMENT PREFERENCE**

<p>Full Time <input type="checkbox"/></p> <p>Part Time <input type="checkbox"/></p> <p>Substitute <input type="checkbox"/></p>	<p><b>Specialized Training</b></p> <p>Non-Violent Crisis <input type="checkbox"/></p> <p>WEVAS <input type="checkbox"/></p> <p>CPR <input type="checkbox"/></p> <p>First Aid <input type="checkbox"/></p> <p>A.S.L. <input type="checkbox"/></p>
<p><b>Grade Preference</b></p> <p>Elementary <input type="checkbox"/></p> <p>Middle Years (6, 7, 8 ) <input type="checkbox"/></p> <p>Secondary (9, 10, 11, 12) <input type="checkbox"/></p>	<p>Child Care <input type="checkbox"/></p> <p>Early Childhood <input type="checkbox"/></p> <p>Support Worker <input type="checkbox"/></p> <p>Respite Worker <input type="checkbox"/></p> <p>Health Care <input type="checkbox"/></p> <p>Special Needs <input type="checkbox"/></p> <p>American Sign Language <input type="checkbox"/></p> <p>List Below :</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p>

Are you qualified for a position in the following areas:	Yes	No
<b>Special Needs</b>		
Working with students who may be:		
(a) physically challenged;	_____	_____
(b) mentally challenged;	_____	_____
(c) have a behaviour disorder etc.	_____	_____
Cree Immersion		
Ojibwe Immersion		
French Immersion		

Would you be able to assist in the following areas:

	Yes	No
High School Math Skills – Pre-Cal, Consumer Math, Algebra etc. Please circle grade level that you would be able to assist student with: 9 10 11 12		
Swimming – Attend swim class with student and assist instructor in water, with lifting in & out of water etc. if required.		

**D. Employment History**

Please provide information on your previous employment, beginning with your last employer.

Employer	Nature of Work	Employment Dates	
		From	To

**E. Special Experience and Interests**

Please list any special experiences gained from either regular employment or volunteer work that may be particularly useful for work as an Ojibwe/Cree language speaker.

---



---



---



---



---

**F. References**

Please provide names, addresses and telephone numbers of three persons whom we may contact for **business** references.

Name	Company	Address	Telephone

**The Seven Oaks School Division requires Child Abuse Registry and Criminal Records Checks. The Division also requires WEVAS (Working Effectively with Violent & Aggressive Students) or Non-Violent Crisis Intervention Course, as well as CPR and First Aid. Please attach originals to your registration.**

\_\_\_\_\_  
Signature of Applicant

**FREEDOM OF INFORMATION AND PROTECTION OF PRIVACY ACT**

This personal information is being collected under the authority of Seven Oaks School Division and will be used for the purpose of identifying potential staff for term, permanent or substitute positions.

It is protected by the Protection of Privacy provisions of the Freedom of Information and Protection of Privacy Act. If you have any questions about the collection, contact the Assistant Superintendent of Personnel, 830 Powers Street, Winnipeg, MB. R2V 4E7.

**Note: Complete application packages should be addressed to:**

CATEP – c/o Lydia Sheyka  
Seven Oaks School Division  
830 Powers Street  
Winnipeg, Manitoba, R2V 4E7