

**IN-PROVINCE
TEACHER EXCHANGE
APPLICATION FORM**



**South Shore Regional
School Board**

130 North Park St. Bridgewater NS B4V 4G9

Phone: (902) 543-2468 Toll free: 1 888 252 2217 Fax: (902) 541-3051 Toll free: 1 888 252 2218

For the School Year 20_____ to 20_____

I. PERSONAL

Professional #: _____

Name in Full: _____

Street Address: _____

City/Town: _____

Date of Birth: _____ Home Phone: _____

Family Members to Accompany You:

Name	Relationship	Age
_____	_____	_____
_____	_____	_____
_____	_____	_____

II. THE SCHOOL

Name and Address and Telephone Number of Present School

School Board _____

Name of Principal _____

III. QUALIFICATIONS

(a) Post secondary school education and training:

Degree(s)	Institution(s)	Year(s)
_____	_____	_____
_____	_____	_____
_____	_____	_____

(b) Teacher's Certificate held _____

IV. EXPERIENCE

Number of years teaching experience to date: _____

From To School Board Type of School (Elementary, etc.)

V. THE POSITION

(a) Grade(s) and subject(s) being taught this year:

(b) I am prepared to teach classes and subjects corresponding to the following:

Grade(s) _____

Subject(s) _____

(c) After consulting my principal, I understand that the exchange teacher will be required to teach the following classes and subjects:

Grade(s) _____

Subject(s) _____

VI. SPECIAL ABILITIES

(a) Please indicate if you have special training or interests in school sports, music, drama, etc.

(b) Work experience that you think might be relevant:

VII. ACCOMMODATIONS

To complete exchanges it is usually necessary to exchange accommodations.

(a) Do you agree to exchange accommodations with your exchange partner? Yes ___ No ___

If Yes, under what (if any) conditions: _____

(b) I live in: _____ Detached House _____ Apartment Other (specify) _____

(c) My accommodation is _____ Owned _____ Rented

(d) My accommodation is shared _____ Yes _____ No

(e) Number of rooms available _____ (f) Number of bedrooms available _____

(g) Any additional information about the accommodation that might be relevant: _____

VIII. PERSONS TO BE NOTIFIED IN CASE OF EMERGENCY?

Name	Address	Phone Number
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_____	_____	_____
_____	_____	_____
_____	_____	_____

IX. PROPOSED EXCHANGE: LIST IN ORDER PREFERRED SCHOOL BOARD FOR THE EXCHANGE:

FIRST CHOICE School Board: _____

SECOND CHOICE School Board: _____

THIRD CHOICE School Board: _____

X. REMARKS (ANY ADDITIONAL INFORMATION WHICH WOULD ASSIST IN MAKING AN EXCHANGE)

I certify that all information provided herein is true and correct to the best of my knowledge and belief.

Signature of Applicant: _____

Date: _____

**DEADLINE FOR APPLICATION:
POSTMARKED NO LATER THAN JANUARY 31**

Conditions:

1. Exchanges will remain in the employ of their own School Board and will continue to have their salaries remitted to them on exchange. They will, therefore, continue to be subject to their normal taxation, pension and benefit contributions, and will retain their rights and privileges as employees of their School Board.
2. Notwithstanding Condition # 1 above, exchanges shall acquaint themselves with conditions of employment of the host School Board, and shall agree to abide by same. In the event of a disagreement concerning the conditions of employment, the exchange shall be bound by the decision of the Supervisory Committee.
3. The applicant must be genuinely interested, fully intend to accept an exchange if a suitable one is offered, and be able to adapt to conditions in the new environment. The applicant must be able to furnish a medical certificate to the effect that the applicant is in good health and free from any condition likely to impair the applicant's mental or physical activity as an exchangee.
4. Exchangees will be encouraged to exchange living accommodations with their counterparts, but all travel and living accommodation arrangements and costs are solely the responsibility of the exchanging teachers.
5. The applicant must agree to return to the School Board from which the applicant came for a full year after service in the other School Board.
6. The term of the exchange shall be one (1) year.
7. Exchanges are organized on a position-to-position basis, and the exchange cannot occur without the approval of the two (2) School Boards concerned.
8. The exchangee is guaranteed the exchangee's original position subject to the provisions of the Local Agreement upon return to the employing School Board.
9. The exchangee must possess a valid teacher's certificate.

I certify that I have read and understand the Exchange Conditions.

Signature of Applicant: _____

Date: _____