

SUBSTITUTE SECRETARY APPLICATION FORM

TURTLE MOUNTAIN SCHOOL DIVISION

DATE

LAST NAME

FIRST NAME

ADDRESS

TELEPHONE NUMBER

EMAIL ADDRESS

Notice of direct deposit will be sent to the email address provided.

SOCIAL INSURANCE NUMBER

DATE OF BIRTH

** Applicants who are new to the Division must submit a resume with three references.

I am available to substitute in the following locations:

Boissevain Killarney Division Board Office

I am **not** available on the following dates/days: _____

Yes No I consent to electronic pay statements available via secure online access. Turtle Mountain School Division will supply me with a user ID, password and instructions.

Yes No I consent to receive my T4 electronically from a secure online site and will print when it is available. I understand the copy I print is a legal, acceptable form and can be used for filing my personal income tax return.

Turtle Mountain School Division uses the direct deposit method for paying employees; therefore, please remit a void cheque to which account you would like your sub fees deposited.

Return application and void cheque to:
Turtle Mountain School Division
435 Williams Avenue
Box 280 Killarney, MB R0K 1G0
Telephone: (204) 523-7531

Applicant's Signature