

**ESL TEACHING STAFF APPLICATION FORM**

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

**I. Personal Information** M  F

Name: \_\_\_\_\_  
*Last**First**Middle*

Address: \_\_\_\_\_  
*Street*  


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*City**Province**Country**Postal*

Date of Birth \_\_\_\_\_ Place of Birth \_\_\_\_\_ Citizenship \_\_\_\_\_  
 SIN \_\_\_\_\_ Emergency Contact Name \_\_\_\_\_ Emergency Contact No. \_\_\_\_\_

Phone: \_\_\_\_\_ (Home) \_\_\_\_\_ (Business) \_\_\_\_\_ (Mobile) \_\_\_\_\_  
 Email: \_\_\_\_\_ Fax: \_\_\_\_\_ Preferred Mode of Communication  Phone:  \_\_\_\_\_  
 Email:  \_\_\_\_\_  
 Fax:  \_\_\_\_\_

**II. Education**

Name of Institution	Institution Location	Degrees/Diploma/Certificate	Major	Date Started and Completed

**III. Certificate Qualifications**

**To qualify as a CSE instructor, a bachelor’s degree in any subject as well as TESL / TESOL / TEFL certification is mandatory.**

Do you currently hold a TESL / TESOL / TEFL certificate? Yes  No   
 If “NO” above, please indicate status / date of completion: \_\_\_\_\_  
 Name of Institution: \_\_\_\_\_

Other than qualifications, list possible contribution to enhancing the ESL Program and personal teaching methodology to be brought to the Program:  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

What language(s) other than English do you speak? \_\_\_\_\_ Write? \_\_\_\_\_ Speak? \_\_\_\_\_  
 \_\_\_\_\_ Write? \_\_\_\_\_ Speak? \_\_\_\_\_

**IV. Work Experience**

a. Teaching Experience

Please list all teaching experiences beginning with the most current:

School	Position	Dates	Grade Level(s)	Courses Taught

b. Other **Related** Working Experience

Company	Position	Dates	Job Description

c. Volunteer / Extracurricular

Organization	Capacity	Dates	Description

**V. Professional References**

Name	Title	Organization	Contact #(s)	Email

**VI. Please answer the following:**

Are there currently any outstanding criminal charges against you? (Note: A criminal charge or conviction will not automatically exclude you from employment opportunities. The requirements of the position applied for and the circumstances related to the charge or conviction will be considered.) Yes  No

If "YES", reason: \_\_\_\_\_

Do you know of any reason why you should not be employed in a capacity in which you work with or will work with children? Yes  No

If "YES", reason: \_\_\_\_\_

Have you ever been dismissed, suspended or disqualified as a member of any profession or organization?

Yes  No

If "YES", reason: \_\_\_\_\_

**Note: A criminal record check is required.**

**Please read the following carefully before signing.**

**APPLICANT'S DECLARATION AND AGREEMENT**

I declare that all the information I have provided on Pages 1-3 of the Application and in any other documents which accompany this application is complete and true in every respect and I understand that any failure to completely and truthfully answer the questions asked of me, when discovered, will constitute sufficient grounds for dismissal.

I give permission for CINEC Education Group (CINEC) to contact any references and present and/or prior employers and further understand that confidential reference reports and personal information which become part of this application will be regarded as confidential. I understand that any information given CINEC by a referee will be kept confidential and will not be released to me, the applicant, without the consent of the referee.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Applicant's Signature

**Please submit this completed Application Form with your cover letter, resume and all other pertinent documents to:**

**CINEC Education Group**  
915 – 355 Burrard Street  
Vancouver, BC V6C 2G8  
**Email : [program@cinec.ca](mailto:program@cinec.ca)**  
**Phone 604.608.6188**  
**Fax 604.563.6969**

**For more information, please visit our website at [www.cinec.ca](http://www.cinec.ca)**

*Please note that only applicants considered for interview will be contacted. Thank you for your interest.*