

## UNIVERSITY OF VICTORIA APPLICATION FORM CUPE 4163 Specialist Instructional Laboratory Instructors, Academic and Scientific Assistants, etc.

Complete a separate Application Form for each Department/School to which you are applying.

NAME:	(last)	(first)				(middle)		
ADDRESS:				_	_			
	POSTAL CODE				L CODE:			
TELEPHONE	· (home)	(work)			E-MAIL:			
Are you regist	ered in an acad	lemic program at U-Vic?				STUDENT STATE	US	
If yes, which department?						Grad U-Gra	d	
Are you willing to do extra work for extra pay? (13.01(e))						YEAR	•	
How many sections are you able to teach? Will you accept a position						t listed below?		
When can you NOT work? (Classes run from 0830 to 2230 hours.)								
List the top three 1st Preference	positions for which	you prefer to be considered indica	ting the Po	osition Title a	and Course.			
2nd Preference								
3rd Preference								
any potential valu		lifications and experience pertinent I have for your academic program o ent/School.						
<b>Agreement.</b> Sele pedagogical value	ection criteria will in e of the position to	cordance with Article 13.02 (Apporciate the condition of	ed on aca ences, an	demic merit d other sour	and related exces of financia	xperience, the career and/or		
Applicant's Signature				•	Date			

## RETURN TO CHAIR/DIRECTOR/DESIGNATE OF DEPARTMENT/SCHOOL

NOTE: IF YOU ARE NOT LEGALLY AUTHORIZED TO WORK IN CANADA, YOU WILL BE REQUIRED TO SUBMIT PROOF OF WORK AUTHORIZATION BY EMPLOYMENT & IMMIGRATION IF YOU ARE SELECTED FOR EMPLOYMENT. INTERNATIONAL STUDENTS MUST BE REGISTERED FULL-TIME AT THE UNIVERSITY OF VICTORIA TO BE ELIGIBLE FOR AUTHORIZATION.