

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:									
CITY:				POSTA	POSTAL CODE:				
TELEPHONE:	(home)	(work)			E-MAIL:				
Are you registe	ered in an acac				STU	DEN	T STATUS	S	
If yes, which department?						Grad		U-Grad	
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 bel	ow?		
When can you NOT work? (Classes run from 0830 to 2230 hours.)									
List the top three positions for which you prefer to be considered indicating the Position Title and Course.									
1st Preference									
2nd Preference									
3rd Preference									
any potential value		lifications and experience pertinent I have for your academic program or annual prog							
Appointments will be made in accordance with Article 13.02 (Appointment Procedures) and Appendix A of the CUPE 4163 Collective Agreement. Selection criteria will include: qualifications and ability based on academic merit and related experience, the career and/or pedagogical value of the position to the applicant, the applicant's preferences, and other sources of financial support being received. Employment decisions are anticipated to be made approximately two weeks from the closing date of posting.									
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.