

**APPLICATION FOR IN-PROVINCE TEACHER
EXCHANGE NOVA SCOTIA**

FOR THE SCHOOL YEAR 20__ TO 20__

PLEASE CHECK THE APPROPRIATE BOX BELOW:

I do not have a proposed exchange partner

I have an exchange partner

Exchange Partner's Name _____

I. PERSONAL

Name in Full _____

Street Address _____

City _____

Phone _____

Professional # _____ Email _____

II. WORK SITE

Name and Address and Telephone Number

Employer/Education Entity _____

Name of Supervisor _____

**DEADLINE FOR APPLICATIONS:
RECEIVED NO LATER THAN JANUARY 15**

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	Employer/ Education Entity	Details (Elementary, Department, Branch etc.)
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

V. THE POSITION

(a) Current Assignment:

(b) I am prepared to take assignments corresponding to the following:
Grade(s)/Subject(s) _____
EECD Assignment: _____
Other: _____

(c) After consulting my Supervisor, I understand that the exchange teacher will be required to take the following assignment:
Grade(s)/Subject(s) _____
EECD Assignment: _____
Other: _____

VI. ADDITIONAL TRAINING AND EXPERIENCE

(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. PERSONS TO BE NOTIFIED IN CASE OF EMERGENCY?

Name	Address	Phone Number
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VIII. PROPOSED EXCHANGE: LIST IN ORDER PREFERRED EMPLOYER FOR THE EXCHANGE:

FIRST CHOICE Education Entity/EECD _____

SECOND CHOICE Education Entity/EECD _____

THIRD CHOICE Education Entity/EECD _____

PLEASE ATTACH A CURRENT RESUME

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

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

Signature of Applicant: _____ Date: _____

Conditions:

1. Exchangees will remain in the employ of their own employer and will continue to have their salaries remitted to them while 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 employer.
2. Notwithstanding Condition 1 above, exchangees shall acquaint themselves with conditions of employment of the host employer, and shall agree to abide by same. In the event of a disagreement concerning the conditions of employment, the exchangee 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 employer from which the applicant came for a full year after service in the other employer.
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) employers concerned.
8. The exchangee is guaranteed the exchangee's original position subject to the provisions of the Local Agreement upon return to the employing employers.
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: _____

Suggestions

- Use **The Teacher** to identify possible exchange partners. (See **Classified** section of **The Teacher** for examples)