

A. Applicant Details

Surname

First name

District

BU

Phone

Email

Address

B. Application Details

Please indicate if you wish to be recognized in the following categories

In English, I am comfortable:

Reading Speaking Writing

In French, I am comfortable:

Reading Speaking Writing

Additional Comments

* Committee/Council for which you are applying

* Indicate **the OSSTF/FEESO Member in good standing who will be submitting a Confidential recommendation form on your behalf.**

Name

Email

An application is not considered complete until a OSSTF/FEESO Member in good standing has submitted a recommendation for the candidate.

C: Additional Application Details

Please use this section to add additional details to your application.

How will the Committee/Council benefit from your participation? (Please indicate strengths that you will bring to the Committee/Council based on the Statement of Needs)

How will you benefit from participation on the Committee/Council?

SPECIALIZED KNOWLEDGE/EXTERNAL EXPERIENCE

School Year	Experience	Special Responsibilities (Be specific) <small>Limit: 180 Characters</small>

LOCAL OSSTF/FEESO

School Year	Experience	Special Responsibilities (Be specific) Limit: 180 Characters

PROVINCIAL OSSTF/FEESO

School Year	Experience	Special Responsibilities (Be specific) Limit: 180 Characters

Additional Information

D:* Indicate your participation history

I currently serve on this Committee/Council and my appointment type is Term Appointment
 Co-option

I am not on this Committee/Council but have served on it previously

I have never served on this Committee/Council

I currently serve as a term appointment on another Committee/Council and my term appointment will end by

I currently serve as a co-option appointment on another Committee/Council

* Indicate your Appointment preference below

- Term Appointment Only
- Co-Option Appointment Only
- Either Term or Co-Option

E: Eligibility to serve on a Committee/Council

If appointed, I will continue to be an active member as defined in Bylaw 2 of the OSSTF/FEESO Constitution and Bylaws at the commencement of my term.

By submitting this application, I assert the information contained herein is accurate to the best of my knowledge and is a faithful representation of my skills, experience and abilities.

Please email a copy of your Application Form and blank Confidential Recommendation Form to the OSSTF/FEESO Member in good standing of your choosing in order to complete the application process.

Equity Statement

The Ontario Secondary School Teachers' Federation (OSSTF/FEESO) is dedicated to equity, anti-racism and anti-oppression while protecting and enhancing public education. OSSTF/FEESO values the participation of members with various lived experiences. We actively seek and welcome applications from First Nations, Métis, Inuit and equity-seeking groups. Self-identification is voluntary.

Please complete the Voluntary Self-Identification Form and submit it with your application to Giovanna Papatheodorou at pcapplications-temp2022@osstf.ca

You are not required to share your completed Voluntary Self-Identification Form with the OSSTF/FEESO Member in good standing completing your Confidential recommendation form.

To facilitate processing applications, both the application and the Confidential Recommendation Forms must be received by the Provincial Office by MARCH 1, 2023.

Applications received after March 1, 2023 will be considered for co-option, but will only be considered for appointment if there are insufficient on-time applications on file at Provincial Office.