



**CONTINUING EDUCATION**

**Instructor Application for Existing Courses**

**PERSONAL INFORMATION**

Last Name:	First Name:
Home Address:	Postal Code:
Home Phone:	Business Phone:
Email Address:	Cell Phone:
Occupation:	Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female
If CBE Teacher, name of School:	

**AREAS OF EXPERTISE**

Please list in order of preference, the SUBJECTS OR TOPICS AREAS you wish to teach.

1.	2.
3.	4.

**TRAINING/EDUCATION**

Indicate education/experience relating to Continuing Education and attach a resume:


**INSTRUCTIONAL EXPERIENCE**

Date:	Signature

Please mail completed Instructor Application to:  
**Instructor Application**  
**Chinook Learning Services, Continuing Education**  
**Viscount Bennett Centre**  
**2519 Richmond Road SW**  
**Calgary, AB T3E 4M2**  
**OR**  
**Fax to: 403-777-7568 OR e-mail: [chinookconted@cbe.ab.ca](mailto:chinookconted@cbe.ab.ca)**

Your application will be forwarded to the appropriate Program Leader for review and approval. You will be contacted if there is an opening for your skills. Please note that Calgary Board of Education Policy 2027.4 requires that applicants WHO ARE OFFERED EMPLOYMENT must have a police security clearance.