



# Personal Information Form

For use by **External Applicants – Confidential when completed**

## Section 1: Personal Information

<b>Legal First Name:</b>		<b>Last Name:</b>	
<b>Middle Name:</b>		<b>Preferred Name:</b>	
<b>Date of Birth:</b>		<b>Social Insurance Number:</b>	
<b>Home Phone:</b>		<b>Alternate Phone:</b>	
<b>Complete Mailing Address:</b>	(Street, City, Postal Code):		

## Section 2: Application Information

Do you have a relative/spouse/partner in the department or school in which this position exists:  Yes  No  
If yes, please indicate Name(s): \_\_\_\_\_

Have you previously worked with the CBE?  Yes  No If Yes, indicate Date From \_\_\_\_\_ To \_\_\_\_\_  
Under what Name? \_\_\_\_\_ Under what Employee ID? \_\_\_\_\_

Languages Spoken / Written:  English  French  Other (specify) \_\_\_\_\_

Standard First Aid/CPR?  Yes  No If yes, where taken: \_\_\_\_\_  
Expiry Date: \_\_\_\_\_

Therapeutic Crisis Intervention?  Yes  No If yes, where taken: \_\_\_\_\_  
Expiry Date: \_\_\_\_\_

## Section 3: Emergency Contact(s)

Name:	Relationship:	Address:	Phone Number:

## Section 4: Criminal Declaration of Offence(s)

Have you ever been convicted, or found guilty, of a Criminal Offence under the Criminal Code of Canada or in any other Country for which a pardon has not been granted? Please check one:  Yes  No  
If Yes, indicate the charge in space below:

Nature of Conviction:	Date of Offence:	Country / Province:

Please Note: The Calgary Board of Education Policy 4027.4 requires that as a condition of employment, all applicants who are offered employment are required to provide a Police Security Clearance before employment is confirmed. **Do not obtain a Security Clearance on behalf of your application.**

## Section 6: Signatures

By way of my signature below, I certify that the information provided in this application is true, without material omissions of any kind. I understand that failure to accurately and fully complete this form in its entirety may disqualify my application for consideration.

\_\_\_\_\_  
Applicant's Signature Date

Personal information is collected under the authority of Alberta's *Freedom of Information and Protection of Privacy Act (FOIP)*. This information will be used for the management of personnel and for the delivery of various Human Resources programs at the Calgary Board of Education. It will be treated in accordance with the privacy protection provisions of FOIP. If you have any questions about the FOIP Act, please access <http://www.cbe.ab.ca/legal/foip>. If you have any questions about this form and/or the use of the information, please contact the Employee Contact Centre at 1-403-817-7333.