

Reviewed by: signature

Human Resource Services

Date

Teacher Request: Review of Educational Preparation

Teacher Request: Review of Educational Preparation	n
Date	Employee Number
Last Name	First Name
Home Phone	Cell Phone
Email	
University Transcripts: Transcripts must indicate 3 of	areas recognized: School District 61 Qualifications Document or more full year senior level courses (level 300 and above)
	nchment
Return completed for to Human Resource Servi	ice by email: teacherqualifications@sd61.bc.ca
For Human Resources Office Use Only:	
☐ Educational Preparation request approved for:	