

**AVAILABILITY FOR EXTRA HOURS & SUBSTITUTE WORK
SCHOOL DISTRICT NO. 48 (SEA TO SKY)**

This will confirm that I _____, wish to have my name retained on the CUPE Authorized Substitute List for consideration of on-call assignments. This will confirm that I wish to be considered for on-call assignments in the following positions, in order of preference, which I am qualified for:

1. _____
2. _____
3. _____
4. _____
5. _____

<p>I am available for work:</p> <p>Mondays <input type="checkbox"/> Saturdays <input type="checkbox"/></p> <p>Tuesdays <input type="checkbox"/> Sundays <input type="checkbox"/></p> <p>Wednesdays <input type="checkbox"/></p> <p>Thursdays <input type="checkbox"/></p> <p>Fridays <input type="checkbox"/></p>	<p>I can work in the following communities:</p> <p>Squamish <input type="checkbox"/></p> <p>Whistler <input type="checkbox"/></p> <p>Pemberton <input type="checkbox"/></p>
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I may be unavailable for on-call work at the following times for the following reason:

Contact Phone Number(s)

I understand that should any of the information provided on this form change, it is my responsibility to complete and submit an updated form.

Signature

Date

Please return to:

Human Resources Department
School Board Office

cc: Supervisor