



ST. THOMAS AQUINAS ROMAN CATHOLIC SCHOOLS

SUBSTITUTE TEACHER APPLICATION FORM

<input type="checkbox"/> Mrs. <input type="checkbox"/> Miss <input type="checkbox"/> Ms <input type="checkbox"/> Mr. Last Name: First Name: Address: City/Town: Province: Postal Code: Social Insurance No.: [][][]-[][][]-[][][] Birth Date: [][][][][][][][] Y Y Y Y M M D D	PHONE NUMBERS/EMAIL ADDRESS Home Phone: Cell Phone: Daytime Phone: Email Address:														
PROFESSIONAL INFORMATION Teaching Certificate No.: [][][][][][][][] <input type="checkbox"/> Interim Professional [][][][][][][][] Expiration Date Y Y Y Y M M D D <input type="checkbox"/> Permanent Professional <input type="checkbox"/> Letter of Authority <input type="checkbox"/> [][] No. of Years of University (as per TQS)	TIMES AVAILABLE TO SUBSTITUTE Monday <input type="checkbox"/> AM <input type="checkbox"/> PM Tuesday <input type="checkbox"/> AM <input type="checkbox"/> PM All Days Wednesday <input type="checkbox"/> AM <input type="checkbox"/> PM <input type="checkbox"/> Thursday <input type="checkbox"/> AM <input type="checkbox"/> PM Friday <input type="checkbox"/> AM <input type="checkbox"/> PM														
ARE YOU ABLE TO ACCEPT ASSIGNMENTS IN Special Education: <input type="checkbox"/> Yes <input type="checkbox"/> No Core French: <input type="checkbox"/> Yes <input type="checkbox"/> No	<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 80%;">SUBJECTS PREFERRED</th> <th style="width: 20%;">GRADES</th> </tr> </thead> <tbody> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> </tbody> </table>	SUBJECTS PREFERRED	GRADES												
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CHECK PREFERRED SCHOOLS <input type="checkbox"/> Notre Dame School (Leduc) K-6 <input type="checkbox"/> St. Anthony School (Drayton Valley) K - 8 <input type="checkbox"/> St. Benedict School (Leduc) K -5 <input type="checkbox"/> STAR Catholic Outreach School (Leduc) 10 - 12 <input type="checkbox"/> Christ The King Jr/Sr High School (Leduc) 7 - 12 <input type="checkbox"/> Father Lacombe School (Lacombe) K - 9 <input type="checkbox"/> Sacred Heart School (Wetaskiwin) K - 9 <input type="checkbox"/> Holy Trinity Academy (Drayton Valley) 9 - 12 <input type="checkbox"/> St. Augustine School (Ponoka) K - 12 <input type="checkbox"/> Academie Saint Andre (Beaumont) K - 4															
I am Catholic and am comfortable teaching religion classes. <input type="checkbox"/> Yes <input type="checkbox"/> No															
Note: This information is being collected and used in accordance with Section 32(1), 33 and 37 of the Freedom of Information and Protection of Privacy Act (1997).															
DATE:	APPLICANT SIGNATURE:														
IMPORTANT: In order for applicants to be considered for substitute teaching within our division, this Substitute Teacher Application Form MUST be fully completed and forwarded with all of the following documents. <input type="checkbox"/> Copy of a valid Alberta Teaching Certificate <input type="checkbox"/> Police Criminal Record Check (conducted within the last 3 months) <input type="checkbox"/> Child Welfare Information Services Check (conducted within the last 3 months) <input type="checkbox"/> Teacher Qualification Statement (TQS) (May be waived - Contact us for details) <input type="checkbox"/> 2013 Personal Tax Credits Return and 2013 Alberta Personal Tax Credits Return Forms (See following forms) <input type="checkbox"/> New Employee Information Form (See following form)															
FOR INTERNAL USE ONLY:															



ST. THOMAS AQUINAS ROMAN CATHOLIC SCHOOLS

NEW EMPLOYEE INFORMATION OR

CHANGE OF EMPLOYEE INFORMATION

Please complete and forward to the Payroll Department as soon as possible.

Last Name: _____ First Name: _____

Address: _____

City/Town: _____ Province: _____ Postal Code: _____

Phone No.: _____ Gender: Male Female

Social Insurance No.: [][][]-[][][]-[][][] Birth Date: [][][][] [][][][] [][][][]
Y Y Y Y M M D D

Position Hired For: _____ FTE: _____

School Working At: _____ Start Date: [][][][] [][][][] [][][][]
Y Y Y Y M M D D

TEACHERS ONLY

Teaching Certificate Number: [][][][][][][][]
 Alberta Interim Professional Certificate Expiration Date: [][][][] [][][][] [][][][] or Permanent
Y Y Y Y M M D D

Teaching Education: [][] No. of Years Teaching Experience: [][] No. of Years

*Teachers must provide copies of their Teacher Qualification Statement, Teacher Certificate and letters of experience for grid placement.

BANKING INFORMATION

Mailing Address: _____
(If different from address above)

City/Town: _____ Province: _____ Postal Code: _____

Please attach a photocopy or a voided cheque for the bank account and complete the following information.

Name of Bank for Cheque Deposit: _____

Address of Bank: _____

City/Town: _____ Province: _____ Postal Code: _____

Phone Number of Bank: _____ Fax Number of Bank: _____

Bank No.: _____ (3 Digits) Bank Transit No.: _____ (5 Digits) Bank Account No: _____

Signature of Employee _____ Date _____

This information is collected and distributed in accordance with the Freedom of Information and Protection of Privacy (FOIP) Act, Sections 32(c) and 37. Your personal information will be protected as per Part 2 of the Act. For further information concerning the completion of the form, please contact your FOIP Coordinator at St. Thomas Aquinas Catholic Schools, 4906 - 50 Avenue, Leduc, Alberta, T9E 6W9, Phone: (780)986-2500, Toll Free: 1-800-583-0688



Your employer or payer will use this form to determine the amount of your tax deductions.

Read the back before completing this form. Complete this form based on the best estimate of your circumstances.

Last name	First name and initial(s)	Date of birth (YYYY/MM/DD)	Employee number
Address including postal code		For non-residents only – Country of permanent residence	Social insurance number

1. Basic personal amount – Every resident of Canada can claim this amount. If you will have more than one employer or payer at the same time in 2013, see "More than one employer or payer at the same time" on the next page. If you are a non-resident, see "Non-residents" on the next page.

11,038

2. Child amount – Either parent (but not both), may claim \$2,234 for each child born in 1996 or later, that resides with both parents throughout the year. If the child is **infirm**, add \$2,040 to the claim for that child. Any unused portion can be transferred to that parent's spouse or common-law partner. If the child does not reside with both parents throughout the year, the parent who is entitled to claim the "Amount for an eligible dependant" on line 8 may also claim the child amount for that same child.

3. Age amount – If you will be 65 or older on December 31, 2013, and your net income for the year from all sources will be \$34,562 or less, enter \$6,854. If your net income for the year will be between \$34,562 and \$80,256 and you want to calculate a partial claim, get the TD1-WS, *Worksheet for the 2013 Personal Tax Credits Return*, and complete the appropriate section.

4. Pension income amount – If you will receive regular pension payments from a pension plan or fund (excluding Canada Pension Plan, Quebec Pension Plan, Old Age Security, or Guaranteed Income Supplement payments), enter \$2,000 or your estimated annual pension income, whichever is less.

5. Tuition, education, and textbook amounts (full time and part time) – If you are a student enrolled at a university or college, or an educational institution certified by Human Resources and Skills Development Canada, and you will pay more than \$100 per institution in tuition fees, complete this section. If you are enrolled full time, or if you have a mental or physical disability and are enrolled part time, enter the total of the tuition fees you will pay, plus \$400 for each month that you will be enrolled, plus \$65 per month for textbooks. If you are enrolled part time and do not have a mental or physical disability, enter the total of the tuition fees you will pay, plus \$120 for each month that you will be enrolled part time, plus \$20 per month for textbooks.

6. Disability amount – If you will claim the disability amount on your income tax return by using Form T2201, *Disability Tax Credit Certificate*, enter \$7,697.

7. Spouse or common-law partner amount – If you are supporting your spouse or common-law partner who lives with you, and whose net income for the year will be less than \$11,038 (\$13,078 if he or she is **infirm**) enter the difference between this amount and his or her estimated net income for the year. If your spouse's or common-law partner's net income for the year will be \$11,038 or more (\$13,078 or more if he or she is **infirm**), you cannot claim this amount.

8. Amount for an eligible dependant – If you do not have a spouse or common-law partner and you support a dependent relative who lives with you, and whose net income for the year will be less than \$11,038 (\$13,078 if he or she is **infirm** and you **did not claim the child amount** for this dependant), enter the difference between this amount and his or her estimated net income. If your eligible dependant's net income for the year will be \$11,038 or more (\$13,078 or more if he or she is **infirm**), you cannot claim this amount.

9. Caregiver amount – If you are taking care of a dependant who lives with you, whose net income for the year will be \$15,334 or less, and who is either your or your spouse's or common-law partner's:

- parent or grandparent (aged 65 or older), enter \$4,490 (\$6,530 if he or she is **infirm**); or
- relative (aged 18 or older) who is dependent on you because of an **infirmity**, enter \$6,530.

If the dependant's net income for the year will be between \$15,334 and \$19,824 (\$15,334 and \$21,864 if he or she is **infirm**) and you want to calculate a partial claim, get the TD1-WS, and complete the appropriate section.

10. Amount for infirm dependants age 18 or older – If you support an infirm dependant age 18 or older who is your or your spouse's or common-law partner's relative, who lives in Canada, and whose net income for the year will be \$6,548 or less, enter \$6,530. You cannot claim an amount for a dependant you claimed on line 9. If the dependant's net income for the year will be between \$6,548 and \$13,078 and you want to calculate a partial claim, get the TD1-WS, and complete the appropriate section.

11. Amounts transferred from your spouse or common-law partner – If your spouse or common-law partner will not use all of his or her age amount, pension income amount, tuition, education and textbook amounts, disability amount or child amount on his or her income tax return, enter the unused amount.

12. Amounts transferred from a dependant – If your dependant will not use all of his or her **disability amount** on his or her income tax return, enter the unused amount. If your or your spouse's or common-law partner's dependent child or grandchild will not use all of his or her **tuition, education, and textbook amounts** on his or her income tax return, enter the unused amount.

13. TOTAL CLAIM AMOUNT – Add lines 1 through 12.

Your employer or payer will use this amount to determine the amount of your tax deductions.

Continue on the next page ➔

Completing Form TD1

Complete this form **only** if:

- you have a new employer or payer and you will receive salary, wages, commissions, pensions, employment insurance benefits, or any other remuneration;
- you want to change amounts you previously claimed (such as when the number of your eligible dependants has changed);
- you want to claim the deduction for living in a prescribed zone; or
- you want to increase the amount of tax deducted at source.

Sign and date it and give it to your employer or payer.

If you do not complete a TD1 form, your new employer or payer will deduct taxes after allowing the basic personal amount **only**.

More than one employer or payer at the same time

- If you have more than one employer or payer at the same time and you have already claimed personal tax credit amounts on another TD1 form for 2013, you **cannot claim them again**. If your total income from all sources will be **more** than the personal tax credits you claimed on another TD1 form, **check this box**, enter "0" on line 13 on the front page and do not complete lines 2 to 12.

Total income less than total claim amount

- Check this box if your total income for the year from all employers and payers will be **less** than your total claim amount on line 13. Your employer or payer will not deduct tax from your earnings.

Non-residents

Are you a non-resident of Canada who will include 90% or more of your world income when determining your taxable income earned in Canada in 2013? If you are unsure of your residency status, call the International Tax Services Office at **1-800-267-5177**.

- If **yes**, complete the previous page.
• If **no**, **check the box**, enter "0" on line 13 and do not complete lines 2 to 12, as you are not entitled to the personal tax credits.

Provincial or territorial personal tax credits return

If your claim amount on line 13 is more than \$11,038, you also have to complete a provincial or territorial personal tax credit return. If you are an employee, use the TD1 form for your province or territory of employment. If you are a pensioner, use the TD1 form for your province or territory of residence. Your employer or payer will use both this federal form and your most recent provincial or territorial TD1 form to determine the amount of your tax deductions.

If you are claiming the basic personal amount **only** (your claim amount on line 13 is \$11,038), your employer or payer will deduct provincial or territorial taxes after allowing the provincial or territorial basic personal amount.

Note: If you are a Saskatchewan resident supporting children under 18 at any time during 2013, you may be able to claim the child amount on Form TD1SK, *2013 Saskatchewan Personal Tax Credits Return*. Therefore, you may want to complete Form TD1SK even if you are **only** claiming the basic personal amount on this form.

Deduction for living in a prescribed zone

If you live in the Northwest Territories, Nunavut, Yukon, or another prescribed **northern** zone for more than six months in a row beginning or ending in 2013, you can claim:

- \$8.25 for each day that you live in the prescribed northern zone; or
- \$16.50 for each day that you live in the prescribed northern zone if, during that time, you live in a dwelling that you maintain, and you are the only person living in that dwelling who is claiming this deduction.

\$

Employees living in a prescribed **intermediate** zone can claim 50% of the total of the above amounts.

For more information, get Form T2222, *Northern Residents Deductions*, and the Publication T4039, *Northern Residents Deductions – Places in Prescribed Zones*.

Additional tax to be deducted

You may want to have more tax deducted from each payment, especially if you receive other income, including non-employment income such as CPP or QPP benefits, or old age security pension. By doing this, you may not have to pay as much tax when you file your income tax return. To choose this option, state the amount of additional tax you want to have deducted from each payment. To change this deduction later, complete a new Form TD1.

\$

Reduction in tax deductions

You can ask to have less tax deducted if on your income tax return you are eligible for deductions or non-refundable tax credits that are not listed on this form (for example, periodic contributions to a registered retirement savings plan (RRSP), child care or employment expenses, and charitable donations). To make this request, complete Form T1213, *Request to Reduce Tax Deductions at Source for Year(s)* _____, to get a letter of authority from your tax services office. Give the letter of authority to your employer or payer. You do not need a letter of authority if your employer deducts RRSP contributions from your salary.

Certification

I certify that the information given in this return is, to the best of my knowledge, correct and complete.

Signature _____

It is a serious offence to make a false return.

Date _____

Your employer or payer will use this form to determine the amount of your provincial tax deductions.

Read the back before completing this form. Complete this form based on the best estimate of your circumstances.

Last name	First name and initial(s)	Date of birth (YYYY/MM/DD)	Employee number
Address including postal code		For non-residents only – Country of permanent residence	Social insurance number

1. Basic personal amount – Every person employed in Alberta and every pensioner residing in Alberta can claim this amount. If you will have more than one employer or payer at the same time in 2013, see "Will you have more than one employer or payer at the same time?" on the next page.

17,593

2. Age amount – If you will be 65 or older on December 31, 2013, and your net income from all sources will be \$36,497, or less, enter \$4,903. If your net income for the year will be between \$36,497 and \$69,184 and you want to calculate a partial claim, get the TD1AB-WS, *Worksheet for the 2013 Alberta Personal Tax Credits Return*, and complete the appropriate section.

3. Pension income amount – If you will receive regular pension payments from a pension plan or fund (excluding Canada Pension Plan, Quebec Pension Plan, Old Age Security, or Guaranteed Income Supplement payments), enter \$1,355, or your estimated annual pension income, whichever is less.

4. Tuition and education amounts (full time and part time) – If you are a student enrolled at a university, college, or educational institution certified by Human Resources and Skills Development Canada, and you will pay more than \$100 per institution in tuition fees, complete this section. If you are enrolled full time, or if you have a mental or physical disability and are enrolled part time, enter the total of the tuition fees you will pay, plus \$684 for each month that you will be enrolled. If you are enrolled part time and do not have a mental or physical disability, enter the total of the tuition fees you will pay, plus \$205 for each month that you will be enrolled part time.

5. Disability amount – If you will claim the disability amount on your income tax return by using Form T2201, *Disability Tax Credit Certificate*, enter \$13,571.

6. Spouse or common-law partner amount – If you are supporting your spouse or common-law partner who lives with you, and whose net income for the year will be less than \$17,593, enter the difference between \$17,593 and his or her estimated net income. If your spouse's or common-law partner's net income for the year will be \$17,593 or more, you cannot claim this amount.

7. Amount for an eligible dependant – If you do not have a spouse or common-law partner and you support a dependent relative who lives with you, and whose net income for the year will be less than \$17,593, enter the difference between \$17,593 and his or her estimated net income. If your eligible dependant's net income for the year will be \$17,593 or more, you cannot claim this amount.

8. Caregiver amount – If you are taking care of a dependant who lives with you, whose net income for the year will be \$16,192 or less, and who is either your or your spouse's or common-law partner's:

- parent or grandparent (aged 65 or older); or
- relative (aged 18 or older) who is dependent on you because of an infirmity, enter \$10,185.

If the dependant's net income for the year will be between \$16,192 and \$26,377 and you want to calculate a partial claim, get the TD1AB-WS, and complete the appropriate section.

9. Amount for infirm dependants age 18 or older – If you are supporting an infirm dependant aged 18 or older who is your or your spouse's or common-law partner's relative, who lives in Canada, and whose net income for the year will be \$6,728 or less, enter \$10,184. You cannot claim an amount for a dependant you claimed on line 8. If the dependant's net income for the year will be between \$6,728 and \$16,912 and you want to calculate a partial claim, get the TD1AB-WS, and complete the appropriate section.

10. Amounts transferred from your spouse or common-law partner – If your spouse or common-law partner will not use all of his or her age amount, pension income amount, tuition and education amounts, or disability amount on his or her income tax return, enter the unused amount.

11. Amounts transferred from a dependant – If your dependant will not use all of his or her disability amount on his or her income tax return, enter the unused amount. If your or your spouse's or common-law partner's dependent child or grandchild will not use all of his or her tuition and education amounts on his or her income tax return, enter the unused amount.

12. TOTAL CLAIM AMOUNT – Add lines 1 through 11.
Your employer or payer will use your claim amount to determine the amount of your provincial tax deductions.

Continue on the next page ➔

Completing Form TD1AB

Complete this form **only** if you are an employee working in Alberta or a pensioner residing in Alberta and any of the following apply:

- you have a new employer or payer and you will receive salary, wages, commissions, pensions, employment insurance benefits, or any other remuneration;
- you want to change amounts you previously claimed (such as when the number of your eligible dependants has changed);
- you want to increase the amount of tax deducted at source.

Sign and date it and give it to your employer or payer.

If you do not complete a TD1AB form, your new employer or payer will deduct taxes after allowing the basic personal amount **only**.

Will you have more than one employer or payer at the same time?

If you have more than one employer or payer at the same time and you have already claimed personal tax credit amounts on another Form TD1AB for 2013, you **cannot claim them again**. If your total income from all sources will be **more** than the personal tax credits you claimed on another Form TD1AB, enter "0" on line 12 on the front page and do not complete lines 2 to 11.

Total income less than total claim amount

Check this box if your total income for the year from all employers and payers will be **less** than your total claim amount on line 12. Your employer or payer will not deduct tax from your earnings.

Additional tax to be deducted

If you wish to have more tax deducted, complete the section called "Additional tax to be deducted" on the federal Form TD1.

Reduction in tax deductions

You can ask to have less tax deducted if on your income tax return you are eligible for deductions or non-refundable tax credits that are not listed on this form (for example, periodic contributions to a registered retirement savings plan (RRSP), child care or employment expenses, and charitable donations). To make this request, complete Form T1213, *Request to Reduce Tax Deductions at Source for Year(s)* _____, to get a letter of authority from your tax services office. Give the letter of authority to your employer or payer. You do not need a letter of authority if your employer deducts RRSP contributions from your salary.

Forms and publications

To get forms and publications go to www.cra.gc.ca/forms or call 1-800-959-2221.

Certification

I certify that the information given in this return is, to the best of my knowledge, correct and complete.

Signature _____

Date _____

It is a serious offence to make a false return.