

Fillable Form

Application for Appointment as an English Language Assistant in Germany 2008/2009

Closing Date: February 29, 2008

Send completed application form plus three (3) reference forms* by mail, fax or e-mail to the address below. *Please note that at least one of the reference forms must be completed by someone who is able to assess your German language skills.*

Manitoba International Education Branch (IEB)
 11th Floor - 259 Portage Avenue
 Winnipeg, Manitoba R3B 3P4
 Fax: (204) 957-1793
 E-mail: education-excellence@gov.mb.ca

Note: The typed, completed version of this form cannot be saved. Once completed, print the document, ensure that it is signed and dated. Mail or fax it to the address/numbers indicated.

Web site: www.education-excellence.ca , click on *Domestic Students* for Program Information

| READ ALL RELEVANT SECTIONS OF THE ENGLISH LANGUAGE ASSISTANT BROCHURE OR WEB SITE BEFORE COMPLETING THIS FORM. | | | |
|----------------------------------------------------------------------------------------------------------------|--|----------------------------------|----------------------------|
| Last Name: | | First Name: | |
| Date of Birth (dd/mm/yyyy): | | | |
| Current address: | | Telephone: | |
| | | E-mail: | |
| Date when address will expire: | | | |
| *Permanent address: | | Telephone: | |
| | | E-mail: | |
| <i>*All correspondence will be sent to this address during your stay in Germany.</i> | | | |
| Do you have any dependants who will accompany you? Yes <input type="checkbox"/> No <input type="checkbox"/> | | If yes, please give details: | |
| Do you have a passport? Yes <input type="checkbox"/> No <input type="checkbox"/> | | If yes, from which country? | Passport #: |
| | | | **Expiry date: |
| <i>**If your passport expires before October 2008, you will need to apply for a new one.</i> | | | |
| Emergency contact name: | | Relationship: | Emergency contact address: |
| | | | |
| Telephone: | | E-mail: | |
| If you are currently studying, provide: | | | |
| Name of university/college: | | | |
| Date you started your current program of studies: | | | |
| Expected date of completion of studies: | | | |
| Current year of study (please circle or ✓): 2 nd 3 rd 4 th 5 th | | Title of qualification expected: | |
| Major | | Minor | |

| | |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------|
| If you are a post-secondary graduate, provide: | |
| Name of former university/college: | |
| Dates of study: | Type of qualification received: |
| Major | Minor |
| Level of proficiency or qualification in German: None <input type="checkbox"/> Beginner <input type="checkbox"/> Intermediate <input type="checkbox"/> Advanced <input type="checkbox"/> Fluent <input type="checkbox"/> | Other languages: |
| Location, dates and nature of any experience spent abroad for a period of 2 weeks or more, including holidays: | |
| Previous service as an English language assistant: | Details on any formal or informal teaching experience: |
| Additional skills, qualifications, experience or interests: | |
| Which of the above, do you consider to be relevant to the job as an ELA and why? | |
| Reasons for your interest in the ELA program? | |
| Age group you would prefer to work with as an ELA: | |
| <input type="checkbox"/> No preference <input type="checkbox"/> Elementary <input type="checkbox"/> Secondary <input type="checkbox"/> Adult | |
| Preferred location: | |
| <input type="checkbox"/> No preference <input type="checkbox"/> Large city <input type="checkbox"/> Medium-sized town <input type="checkbox"/> Small town/rural | |
| Rank the order of importance of the following criteria: | <input type="checkbox"/> Age of pupils <input type="checkbox"/> Size of town |
| Any other relevant factors that should be taken into account; e.g., physical limitations, serious allergies, medical conditions, religious observance, etc: | |
| <p>The IEB will use the information provided in this application for the purposes of assessing your suitability for the ELA program and, if successful, for administering your participation in the program. We will share your information with collaborating institutions, government departments and other third parties <u>only</u> when required for candidate selection and appropriate administration of the ELA program.</p> | |
| Candidate's declaration | |
| I hereby declare that in seeking a position as an English Language Assistant it is my intention to proceed with the application and to complete the full period of appointment. I have read the conditions of appointment as provided in the corresponding brochure/web site. | |
| Signature of Candidate | Date: |