![C:\Users\MATA\Pictures\MATA_logo[1].jpg]()

**DISTRICT COMMITTEE APPLICATION**

**Please download, fill in your response, and return as an attachment.**

**Introduction**:

 The Collective Agreement of the Mount Arrowsmith Teachers’ Association (MATA) states that local representatives on committees shall be appointed by the local each year. The local will consider the mandate of the committee when appointing the representatives.

 The current Constitution of the MATA states that when the School District initiates committees requiring the involvement of teachers, that the Association is responsible for appointing those teachers in keeping with BCTF Policies and Procedures.

 As a member of a District Committee, you are representing MATA members from your school. At times you will be asked to seek their input regarding directions and decision that the committee may make, and to share out information in a timely manner and then report back to the committee the direction of your school site. You may also be asked to attend a MATA Representative Assembly to share out from the Committee.

**I have read the above, understand and agree to the expectations of me** **YES □ NO □**

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Please provide the following information to assist the Executive in making the annual appointments.

NAME \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ PRESENT ASSIGNMENT \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

DATE \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ SCHOOL YEAR \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ SCHOOL \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

SCHOOL EMAIL \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ HOME EMAIL \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**PLEASE INDICATE WHICH COMMITTEE(S) YOU ARE APPLYING FOR:**

□ **ASSESSMENT, EVALUATION, COMMUNICATING STUDENT LEARNING COMMITTEE (AECSL)**

□ **AECSL GRAD YEARS** □ **TECHNOLOGY COMMITTEE □ CURRICULUM IMPLEMENTATION COMMITTEE (CIAC)**

□ **FRENCH ADVISORY** □ **ACCESSIBILITY** □ **OTHER \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**I sat on this committee during the previous school year and would like to continue**. □

(If you check this box, no need to complete rest of the form, just sign and return)

**I sat on a different committee currently/previously and would like to join this committee.** □

(If you check this box, you **MUST** complete the rest of the form.)

**I am interested in becoming a new addition to this committee. □**

(If you check this box, you **MUST** complete the rest of the form.)

 PLEASE RESPOND TO THE FOLLOWING THREE QUESTIONS IN A BRIEF STATEMENT FOR EACH (20 – 50 words)

1. Please indicate below what experience(s) you have that would contribute to this committee.
2. How will your membership in the committee contribute to other MATA members in your school/site?
3. In what ways have you previously worked to support the Collective Agreement and/or MATA’s professional stance on topics of this committee?

 **I agree to attend, if necessary, an interview with the MATA President/Executive Committee or an organized orientation as part of the approval process for this committee.**

**Signed \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

PLEASE SEND THE COMPLETED FORM TO: THE MATA OFFICE VIA COURIER

OR AS AN EMAIL ATTACHMENT TO:

 MATA President lp69@bctf.ca OR MATA VP lx69vp@bctf.ca

YOUR COMMITTEE APPLICATION WILL BE REVIEWED BY THE MATA EC

AND YOU WILL RECEIVE A CONFIRMATION LETTER