

LUNCHROOM SUPERVISOR Checklist

School: **MICHAEL STREMBITSKY SCHOOL**

Key School Contact (including phone number): **Susan McWhinnie 780-392-3500**

Principal: **Chad Sheppard**

Name of Lunchroom Supervisor: _____

Preferred Start date: _____

- I understand that all of the following documents need to be included in this submission for review. Employment can not commence until all documents are reviewed by HR Consulting.** Processing will be indicated in TRS. Pay will not be issued prior to the date of approval.

The following documents are included:

- Employment Data – Lunchroom Supervisor (page 4)*
 - Work Permit (if applicable)*
- Mandatory Applicant Disclosure (page 5)*
- [Direct Deposit Enrolment Form](#)
- Support for Lunchroom Variance Form (page 6)*
- Police Information Check (Certificate OR In a sealed envelope of a paper copy)*

- police information check link

<https://www.edmontonpolice.ca/CommunityPolicing/OperationalServices/PoliceInformationCheck>

The Edmonton Police have changed how the Police Information Check Certificate is received by applicants.

In order for us to verify the certificate issued we will require (via email) the downloaded password protected document you receive from the Edmonton Police. Please also send your receipt for reimbursement.

- Copy of Social Insurance Number card*
- Copy of photo ID (Drivers License OR Passport)*

NEW HIRE EMPLOYMENT DATA –LUNCHROOM SUPERVISOR

Once completed, this form will include personal information as identified under the *Freedom of Information and Protection of Privacy Act*, and **MUST NOT BE FAXED.**

Mr. Mrs. Ms. Miss

Legal Name:							
	(Last)		(First)		(Preferred)		
Address:				City:			
Postal Code:		Home Phone:			Cell Phone:		
Date of Birth:			E-mail:				
	month/day/year	Social Insurance Number (SIN):					
REMINDER: All new hires must attach a SIN card/letter. If the SIN starts with a "9" a copy of the work permit must be attached.	Copy of the SIN card attached: <input type="checkbox"/> YES			Expiry Date of the SIN Card:			
	Copy of Work Permit attached: <input type="checkbox"/> YES				Month/Day/Year		

Previously Employed by Edmonton Public Schools?	<input type="checkbox"/> Yes	ID#	<input type="checkbox"/> No
Name used if different from above:			
Currently employed by Edmonton Public Schools?	<input type="checkbox"/> Yes	ID #	<input type="checkbox"/> No

School Use Only:

Attachments:

Employee Data Mandatory Applicant Disclosure Direct Deposit Lunchroom Variance Support Form Police Information Check Work Permit

School and Decision Unit#:	Michael Strembitsky School #1578																																																																							
Position Title:	Lunchroom Supervisor																																																																							
Commencement Date:											Last Day of Employment (if known):																																																													
Rate of Pay:	\$22.00																																																																							
<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="border: none;">6</td><td style="border: none;">1</td><td style="border: none;">5</td><td style="border: none;">3</td><td style="border: none;">0</td><td style="border: none;">1</td><td style="border: none;">1</td><td style="border: none;">5</td><td style="border: none;">7</td><td style="border: none;">8</td><td style="border: none;">0</td><td style="border: none;">0</td><td style="border: none;">0</td><td style="border: none;">0</td><td style="border: none;">2</td><td style="border: none;">0</td><td style="border: none;">8</td><td style="border: none;">0</td><td style="border: none;">1</td><td style="border: none;">0</td><td style="border: none;">0</td><td style="border: none;">0</td><td style="border: none;">0</td><td style="border: none;">0</td><td style="border: none;">0</td> </tr> <tr> <td style="border: none; text-align: center;">Account</td><td style="border: none; text-align: center;">Cost Centre</td><td style="border: none; text-align: center;">Site</td><td style="border: none; text-align: center;">Program</td><td style="border: none; text-align: center;">Activity</td><td colspan="19" style="border: none;"></td> </tr> </table>																								6	1	5	3	0	1	1	5	7	8	0	0	0	0	2	0	8	0	1	0	0	0	0	0	0	Account	Cost Centre	Site	Program	Activity																			
6	1	5	3	0	1	1	5	7	8	0	0	0	0	2	0	8	0	1	0	0	0	0	0	0																																																
Account	Cost Centre	Site	Program	Activity																																																																				
Date	DU Administrator										Human Resources Consulting Approval																																																													

COLLECTION AND STORAGE OF PERSONAL INFORMATION

All personal information is collected solely for the purpose of determining suitability, eligibility, or qualifications for employment with Edmonton Public Schools and is retained in accordance with the Freedom of Information and Protection of Privacy Act of Alberta and secured in Human Resources. Information related to staff will be retained in electronic and hard-copy files and will be used to meet district and legal requirements for payroll, recruitment and selection, and information reporting. Human Resources staff, district administrators, and agents of the Board may review information retained in electronic and hard-copy files on a need-to-know.

Mandatory Applicant Disclosure

Edmonton Public Schools is committed to providing a safe environment for students and staff. If you wish your application for employment to be considered, you are required to answer the three questions below under **APPLICANT DISCLOSURE**.

Answering **YES** to any of the questions will not automatically exclude you from further consideration for employment. The requirements of the position and related circumstances will be considered.

Before answering the questions, carefully read the following information:

- Effective September 1, 2004, all employees hired by Edmonton Public Schools are required to submit a Police Information/Criminal Records check which includes information relevant to working with the vulnerable sector, as applicable. The nature of any charges, convictions, or investigations revealed in a Police Information/Criminal Records check, and the date at that time, will be considered relative to the date of hire and the position responsibilities.
- Instructions for obtaining a Police Information/Criminal Records check will be provided at the time of hire or offer of employment.
- If the information revealed by the Police Information/Criminal Records check indicates that an employee or prospective employee is unsuitable for employment with a school division, an offer of employment will be rescinded or employment will immediately be terminated by mutual agreement.

APPLICANT DISCLOSURE		
Details must be provided for a YES response.		
Have you ever been charged or convicted of an offence under the Criminal Code, Narcotic Control Act, Food and Drug Act, or Firearms Act of Canada, or the criminal laws of any other country? If you have been granted a pardon, you are not required to respond YES to this question.	<input type="checkbox"/> YES	<input type="checkbox"/> NO
Have you ever been suspended, disqualified, reprimanded, dismissed or had disciplinary action instituted against you as a member of any profession or organization?	<input type="checkbox"/> YES	<input type="checkbox"/> NO
Have you ever been denied, or had revoked, any certificate, license, or permit?	<input type="checkbox"/> YES	<input type="checkbox"/> NO
Provide details for a YES response including dates, disposition, and any other pertinent information.		
Last name	First name	
Middle name(s)	Date	

Support for Lunchroom Variance Form

Edmonton Public Schools applies for a variance or exemption to the *Employment Standards Regulation Section 11 – Employment for less than 3 Hours*. This variance or exemption applies only to lunchroom supervisors whose role is to provide supervision during the lunch hour and does not apply to other employment in the Division. The variance or exemption allows Edmonton Public Schools to compensate lunchroom supervisors only for actual hours worked.

As you are a Lunchroom Supervisor with _____ (insert school name), you are being advised of the Minister’s Variance or Exemption as a condition of your employment.

Please discuss with your supervisor any questions you may have.

I acknowledge that my supervisor has discussed the lunchroom variance with me. I support the variance and agree, in my role as a lunchroom supervisor, to only be paid for actual time worked during the course of this employment with Edmonton Public Schools.

Employee Name (Print)	
Date	Signature

Principal Name (Print)	
Date	Signature

"Edmonton Public Schools is collecting this personal information in accordance with Section 33(c) of the Freedom of Information and Protection of Privacy Act (FOIP), to determine and verify the Applicant’s eligibility for employment. The use and disclosure of your personal information is managed in Accordance with the FOIP Act. "

	Form – DD	
Emp. ID	Description	Signature

DIRECT DEPOSIT FORM

Instructions:

- Complete **Section A** – Personal Information (*If Social Insurance number begins with “9” a copy of your work visa must be included)
- Complete **Section B** – Confirmation
- Attach a sample cheque marked “**void**” for deposit to a **chequing account**.
- If you **are not depositing to** a chequing account, have your **financial institution** complete and sign **Section C**
- Return the completed form to HR Service Centre - Payroll

SECTION A – Personal Information												
Employee ID #:				Social Insurance # (Required):								
LAST NAME				FIRST NAME				MIDDLE NAME				
SECTION B – Confirmation												
<p>I confirm that Edmonton Public Schools is to deposit my pay into the bank account <u>as identified on the attached cheque</u> or as provided by my financial institution. I understand that it is my responsibility to advise Human Resources - Payroll of any changes in the banking information provided a minimum of fourteen (14) days prior to a direct deposit being made.</p>												
Employee Signature								Date				
SECTION C – To Be Completed By Financial Institution or Attach Void Cheque												
Account Number												
Institution Number					Branch Number							
Name and Address of Financial Institution												
Postal Code			Telephone Number									
Signature of Financial Representative						Date						