



## Non-Teaching Checklist

The following documents must be completed and returned to the Human Resources Services Department before employment can commence. Unless otherwise noted below, we ask that you do not return the package to CCRCE until all documents are complete.

### Employee Information

- You must include a copy of your Social Insurance Number letter or Social Insurance Number card. This must be in your current name. If you do not have a SIN letter or card, or if your SIN letter or card is not in your current name you must contact Service Canada. Visit your local office or phone 1-866-274 6627. CCRCE will destroy the copy of SIN letter/card upon verification.

Void Cheque or direct deposit form from your bank (Must be a printed copy or PDF from your bank. Photos of banking information cannot be accepted)

Completed TD1 and TD1NS (both copies must be signed)

Vulnerable Sector Check dated within the past 6 months - You must submit an original or true and verified copy of the Vulnerable Sector Check. A CCRCE employee must be the one to make a true and verified copy of your Vulnerable Sector Check. The Administrative Assistant at the Family office closest to your home can do this. Any fees as a result of the Vulnerable Sector Check are the responsibility of the employee.

Child Abuse Register clearance letter dated within the past 6 months - You may obtain a Child Abuse Register clearance letter by either applying on line or by regular mail. On line applications are to be sent through the digital service found at <https://beta.novascotia.ca/apply-child-abuse-register-search>. Should you wish to mail your application instead of completing the on-line form we have included within this package the Child Abuse Register Search Form A as well as a document titled *Information for Individuals Applying for a Child Abuse Register Search*. CCRCE requires an original or true and verified copy of the Child Abuse Register clearance letter once received. A CCRCE employee must be the one to make a true and verified copy of the clearance letter. The Administrative Assistant at the Family office closest to your home can do this for you.



## CASUAL EMPLOYEE INFORMATION

POSITION/CLASSIFICATION \_\_\_\_\_

FORM OF ADDRESS     Mr.     Mrs.     Miss     Ms.     Dr.

NAME (in full)  
(Please circle preferred name)

First Name	Middle Name	Last Name
------------	-------------	-----------

SOCIAL INSURANCE NO. \_\_\_\_\_

DATE OF BIRTH (Y/M/D) \_\_\_\_\_

MALE                   FEMALE

MARITAL STATUS \_\_\_\_\_ MAIDEN NAME \_\_\_\_\_

MAILING ADDRESS \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

POSTAL CODE \_\_\_\_\_

TELEPHONE Nos.    Home : \_\_\_\_\_ Cell : \_\_\_\_\_ Other : \_\_\_\_\_

E-MAIL ADDRESS \_\_\_\_\_

EMERGENCY CONTACT NAME \_\_\_\_\_

EMERGENCY CONTACT PHONE NO. \_\_\_\_\_

**THIS FOLLOWING IS REQUIRED FOR TEACHERS/SUBSTITUTE TEACHERS ONLY**

PROF. # \_\_\_\_\_ TC LEVEL \_\_\_\_\_ YEARS OF EXPERIENCE \_\_\_\_\_

## SELF-IDENTIFICATION INFORMATION

Completion of the following information is on a voluntary basis only. Please check the boxes that apply to you.

Member of the Aboriginal peoples of Canada: - Inuit  Metis  First Nation

Member of Visible Minority Groups:

Are you by virtue of your race or color, in a Visible Minority in Canada? YES  NO

If yes, please specify: \_\_\_\_\_

Persons with Disabilities:

For the purposes of employment, do you consider yourself, or do you believe that a potential employer would likely consider you disadvantaged by reason of a persistent disability?

YES  NO  If yes, please specify: \_\_\_\_\_



**Chignecto Central**  
Regional Centre for Education

Human Resources Services  
60 Lorne Street, Yviro, Nova Scotia B2N 3K3  
Phone: 902-897-8900 Fax: 902-897-8948  
www.ccrce.ca

## Direct Deposit

Direct deposit is mandatory for all CCRCE employees. Please attach a void cheque or a direct deposit form and return to this office to ensure data is available for payroll.

**NOTE: Delays may and will occur in pay if cheques are not properly affixed to this document. It is the responsibility of the employee to provide this item to avoid such delays.**

Please **attach** a copy of a void cheque or a direct deposit form from your bank and it will be forwarded it to the payroll department. Either must include a **TRANSIT #, BRANCH # AND ACCOUNT#**.

**Attach Cheque Here**

**Please mark VOID on your cheque.**

NAME: \_\_\_\_\_



# 2023 Personal Tax Credits Return

Protected B when completed

TD1

Read page 2 before filling out this form. Your employer or payer will use this form to determine the amount of your tax deductions. Fill out this form based on the best estimate of your circumstances.

If you do not fill out this form, your tax deductions will only include the basic personal amount, estimated by your employer or payer based on the income they pay you.

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

**1. Basic personal amount** – Every resident of Canada can enter a basic personal amount of \$15,000. However, if your net income from all sources will be greater than \$165,430 and you enter \$15,000, you may have an amount owing on your income tax and benefit return at the end of the tax year. If your income from all sources will be greater than \$165,430, you have the option to calculate a partial claim. To do so, fill in the appropriate section of Form TD1-WS, Worksheet for the 2023 Personal Tax Credits Return, and enter the calculated amount here.

**2. Canada caregiver amount for Infirm children under age 18** – Only one parent may claim \$2,499 for each Infirm child born in 2006 or later who lives with both parents throughout the year. If the child does not live with both parents throughout the year, the parent who has the right to claim the "Amount for an eligible dependant" on line 8 may also claim the Canada caregiver amount for the child.

**3. Age amount** – If you will be 65 or older on December 31, 2023, and your net income for the year from all sources will be \$42,335 or less, enter \$8,396. You may enter a partial amount if your net income for the year will be between \$42,335 and \$98,309. To calculate a partial amount, fill out the line 3 section of Form TD1-WS.

**4. Pension income amount** – If you will receive regular pension payments from a pension plan or fund (not including Canada Pension Plan, Quebec Pension Plan, old age security, or guaranteed income supplement payments), enter whichever is less: \$2,000 or your estimated annual pension income.

**5. Tuition (full-time and part-time)** – Fill in this section if you are a student at a university or college, or an educational institution certified by Employment and Social Development Canada, and you will pay more than \$100 per institution in tuition fees. Enter the total tuition fees that you will pay if you are a full-time or part-time student.

**6. Disability amount** – If you will claim the disability amount on your income tax and benefit return by using Form T2201, Disability Tax Credit Certificate, enter \$9,428.

**7. Spouse or common-law partner amount** – Enter the difference between the amount on line 1 (line 1 plus \$2,499 if your spouse or common-law partner is Infirm) and your spouse's or common-law partner's estimated net income for the year if both of the following conditions apply:

- You are supporting your spouse or common-law partner who lives with you
- Your spouse or common-law partner's net income for the year will be less than the amount on line 1 (line 1 plus \$2,499 if your spouse or common-law partner is Infirm)

In all cases, go to line 9 if your spouse or common-law partner is Infirm and has a net income for the year of \$26,782 or less.

**8. Amount for an eligible dependant** – Enter the difference between the amount on line 1 (line 1 plus \$2,499 if your eligible dependant is Infirm) and your eligible dependant's estimated net income for the year if all of the following conditions apply:

- You do not have a spouse or common-law partner, or you have a spouse or common-law partner who does not live with you and who you are not supporting or being supported by
- You are supporting the dependant who is related to you and lives with you
- The dependant's net income for the year will be less than the amount on line 1 (line 1 plus \$2,499 if your dependant is Infirm and you cannot claim the Canada caregiver amount for Infirm children under 18 years of age for this dependant)

In all cases, go to line 9 if your dependant is 18 years or older, Infirm, and has a net income for the year of \$26,782 or less.

**9. Canada caregiver amount for eligible dependant or spouse or common-law partner** – Fill out this section if, at any time in the year, you support an Infirm eligible dependant (aged 18 or older) or an Infirm spouse or common-law partner whose net income for the year will be \$26,782 or less. To calculate the amount you may enter here, fill out the line 9 section of Form TD1-WS.

**10. Canada caregiver amount for dependant(s) age 18 or older** – If, at any time in the year, you support an Infirm dependant age 18 or older (other than the spouse or common-law partner or eligible dependant you claimed an amount for on line 9 or could have claimed an amount for if their net income were under \$17,499) whose net income for the year will be \$18,783 or less, enter \$7,999. You may enter a partial amount if their net income for the year will be between \$18,783 and \$26,782. To calculate a partial amount, fill out the line 10 section of Form TD1-WS. This worksheet may also be used to calculate your part of the amount if you are sharing it with another caregiver who supports the same dependant. You may claim this amount for more than one Infirm dependant age 18 or older.

**11. Amounts transferred from your spouse or common-law partner** – If your spouse or common-law partner will not use all of their age amount, pension income amount, tuition amount, or disability amount on their income tax and benefit return, enter the unused amount.

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

**13. TOTAL CLAIM AMOUNT** – Add lines 1 to 12.

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

**Filling out Form TD1**Fill out this form **only** if 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 the amounts you previously claimed (for example, the number of your eligible dependants has changed)
- you want to claim the deduction for living in a prescribed zone
- you want to increase the amount of tax deducted at source

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

**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 TD1 for 2023, 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 TD1, check this box, enter "0" on Line 13 and do not fill in Lines 2 to 12.

**Total income is less than the total claim amount**

Tick 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.

**For non-resident only (Tick the box that applies to you.)**

As a non-resident, will 90% or more of your world income be included in determining your taxable income earned in Canada in 2023?

Yes (Fill out the previous page.)

No (Enter "0" on line 13, and do not fill in lines 2 to 12 as you are not entitled to the personal tax credits.)

Call the international tax and non-resident enquiries line at 1-800-959-8281 if you are unsure of your residency status.

**Provincial or territorial personal tax credits return**

You also have to fill out a provincial or territorial TD1 form if your claim amount on line 13 is more than \$15,000. Use the Form TD1 for your province or territory of employment if you are an employee. Use the Form TD1 for your province or territory of residence if you are a pensioner. Your employer or payer will use both this federal form and your most recent provincial or territorial Form TD1 to determine the amount of your tax deductions.

Your employer or payer will deduct provincial or territorial taxes after allowing the provincial or territorial basic personal amount if you are claiming the basic personal amount only.

**Note:** You may be able to claim the child amount on Form TD1SK, 2023 Saskatchewan Personal Tax Credits Return if you are a Saskatchewan resident supporting children under 18 at any time during 2023. Therefore, you may want to fill out Form TD1SK even if you are only claiming the basic personal amount on this form.

**Deduction for living in a prescribed zone**

You may claim any of the following amounts 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 2023:

- \$11.00 for each day that you live in the prescribed northern zone
- \$22.00 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 may claim 50% of the total of the above amounts.

For more information, go to [canada.ca/taxes-northern-residents](http://canada.ca/taxes-northern-residents).

\$ **Additional tax to be deducted**

You may want to have more tax deducted from each payment if you receive other income such as non-employment income from CPP or QPP benefits, or old age security pension. You may have less tax to pay when you file your income tax and benefit return by doing this. Enter the additional tax amount you want deducted from each payment to choose this option. You may fill out a new Form TD1 to change this deduction later.

\$ **Reduction in tax deductions**

You may ask to have less tax deducted at source if 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, charitable donations, and tuition and education amounts carried forward from the previous year). To make this request, fill out Form T1213, Request to Reduce Tax Deductions at Source, 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 our forms and publications, go to [canada.ca/cra-forms-publications](http://canada.ca/cra-forms-publications) or call 1-800-959-5525.

Personal information (including the SIN) is collected for the purposes of the administration or enforcement of the Income Tax Act and related programs and activities including administering tax, benefits, audit, compliance, and collection. The information collected may be used or disclosed for purposes of other federal acts that provide for the imposition and collection of a tax or duty. It may also be disclosed to other federal, provincial, territorial, or foreign government institutions to the extent authorized by law. Failure to provide this information may result in interest payable, penalties, or other actions. Under the Privacy Act, individuals have a right of protection, access to and correction of their personal information, or to file a complaint with the Privacy Commissioner of Canada regarding the handling of their personal information. Refer to Personal Information Bank CRA PPU 120 on Info Source at [canada.ca/cra-info-source](http://canada.ca/cra-info-source)

**Certification**

I certify that the information given on this form is correct and complete.

Signature \_\_\_\_\_

Date \_\_\_\_\_

It is a serious offence to make a false return.

Read page 2 before filling out this form. Your employer or payer will use this form to determine the amount of your provincial tax deductions.  
Fill out 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				Postal code		For non-residents only Country of permanent residence	
						Social insurance number	

**1. Basic personal amount** – Every person employed in Nova Scotia and every pensioner residing in Nova Scotia can claim the basic personal amount. If your taxable income from all sources for the year will be \$25,000 or less enter \$11,481, comprising the basic amount of \$8,481 and the additional amount of \$3,000, and if it is more than \$75,000 enter \$8,481. If your taxable income will be between \$25,000 and \$75,000 and you want to calculate a partial claim for the \$3,000 additional amount, get Form TD1NS-WS, Worksheet for the 2023 Nova Scotia Personal Tax Credits Return, and fill in the appropriate section. If you will have more than one employer or payer at the same time in 2023, see "More than one employer or payer at the same time" on page 2.

**2. Age amount** – If you will be 65 or older on December 31, 2023, and your net income from all sources will be \$30,828 or less, enter \$4,141. You may enter a partial amount if your net income for the year will be between \$30,828 and \$58,435. To calculate a partial amount, fill out the line 2 section of Form TD1NS-WS.

**2.1 Age amount supplement** – If you will be 65 or older on December 31, 2023, and your taxable income from all sources will be \$25,000 or less, enter \$1,465. You may enter a partial amount if your taxable income for the year will be between \$25,000 and \$75,000. To calculate a partial amount, fill out the line 2.1 section of Form TD1NS-WS.

**3. Pension income amount** – If you will receive regular pension payments from a pension plan or fund (not including Canada Pension Plan, Quebec Pension Plan, old age security, or guaranteed income supplement payments), enter whichever is less: \$1,173 or your estimated annual pension.

**4. Tuition and education amounts (full-time and part-time)** – Fill out this section if you are a student at a university, college, or educational institution certified by Employment and Social Development Canada, and you will pay more than \$100 per institution in tuition fees. Enter your total tuition fees that you will pay, plus the amount from the following conditions that apply:

- \$200 for each month you will be a full time student
- \$200 for each month you will be a part-time student who has a mental or physical disability
- \$60 for each month you will be a part-time student who does not have a mental or physical disability

**5. Disability amount** – If you will claim the disability amount on your income tax and benefit return by using Form T2201, Disability Tax Credit Certificate, enter \$7,341.

**6. Spouse or common-law partner amount** – Enter \$8,481 if you are supporting your spouse or common-law partner and both of the following conditions apply:

- Your spouse or common-law partner lives with you
- Your spouse's or common-law partner's net income for the year will be \$848 or less

You may enter a partial amount if your spouse's or common-law partner's net income will be between \$848 and \$9,329. To calculate a partial amount, fill out the line 6 section of Form TD1NS-WS.

**6.1. Spouse or common-law partner supplement** – Enter the difference between \$3,000 and the estimated net income of your spouse or common-law partner if both of the following conditions apply:

- You are supporting your spouse or common-law partner who lives with you
- Your taxable income from all sources will be \$25,000 or less

You may enter a partial amount if your taxable income from all sources will be between \$25,000 and \$75,000 and your spouse's or common-law partner's net income will be under \$3,000. To calculate a partial amount, fill out the line 6.1 section of Form TD1NS-WS.

**7. Amount for an eligible dependant** – Enter \$8,481 if you are supporting an eligible dependant and all of the following conditions apply:

- You do not have a spouse or common-law partner, or you have a spouse or common-law partner who does not live with you and who you are not supporting or being supported by
- The dependant is related to you and lives with you
- The dependant has a net income of \$848 or less for the year

You may enter a partial amount if the eligible dependant's net income for the year will be between \$848 and \$9,329. To calculate a partial amount, fill out the line 7 section of Form TD1NS-WS.

**7.1. Amount for an eligible dependant supplement** – Enter the difference between \$3,000 and the estimated net income of your eligible dependant if all of the following conditions apply:

- You do not have a spouse or common-law partner, or you have a spouse or common-law partner who does not live with you and who you are not supporting or being supported by
- The dependant is related to you and lives with you
- Your taxable income from all sources will be \$25,000 or less for the year

You may enter a partial amount if your taxable income from all sources will be between \$25,000 and \$75,000 and your eligible dependant's net income will be under \$3,000. To calculate a partial amount, fill out the line 7.1 section of Form TD1NS-WS.

- 8. Caregiver amount** – Enter \$4,898 if you are taking care of a dependant and all of the following conditions apply:
- The dependant is your or your spouse's or common-law partner's parent or grandparent (aged 65 or older) or an infirm relative (aged 18 or older)
  - The dependant lives with you
  - The dependant has a net income of \$13,677 or less for the year

You may enter a partial amount if the dependant's net income for the year will be between \$13,677 and \$18,575. To calculate a partial amount, fill out the line 8 section of Form TD1NS-WS.

- 9. Amount for infirm dependants age 18 or older** – Enter \$2,798 if you are supporting an infirm dependant and all of the following conditions apply:
- The dependant lives in Canada and is related to you or your spouse or common-law partner
  - The dependant is 18 years or older
  - The dependant has a net income of \$5,683 or less for the year

You may enter a partial amount if the dependant's net income for the year will be between \$5,683 and \$8,481. To calculate a partial amount, fill out the line 9 section of TD1NS-WS. You cannot claim an amount for a dependant you claimed on line 8.

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

**11. Amounts transferred from a dependant** – If your dependant will not use all of their disability amount on their income tax and benefit 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 their tuition and education amounts on their income tax and benefit return, enter the unused amount.

**12. TOTAL CLAIM AMOUNT** – Add lines 1 to 11.

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

**Filling out Form TD1NS**

Fill out this form if you have taxable income in Nova Scotia 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 the amounts you previously claimed (for example, 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 fill out Form TD1NS, your 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 Form TD1NS for 2023, 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 TD1NS, check this box, enter "0" on line 12 and do not fill in lines 2 to 11.

**Total income is less than the total claim amount**

Tick 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. Then your employer or payer will not deduct tax from your earnings.

**Additional tax to be deducted**

if you want to have more tax deducted at source, fill out section "Additional tax to be deducted" on the federal Form TD1.

**Reduction in tax deductions**

You may ask to have less tax deducted at source if 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, charitable donations, and tuition and education amounts carried forward from the previous year). To make this request, fill out Form T1213, Request to Reduce Tax Deductions at Source, 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 our forms and publications, go to [canada.ca/cra-forms-publications](http://canada.ca/cra-forms-publications) or call 1-800-959-5525.

Personal information (including the SIN) is collected for the purposes of the administration or enforcement of the Income Tax Act and related programs and activities including administering tax, benefits, audit, compliance, and collection. The information collected may be used or disclosed for purposes of other federal acts that provide for the imposition and collection of a tax or duty. It may also be disclosed to other federal, provincial, territorial, or foreign government institutions to the extent authorized by law. Failure to provide this information may result in interest payable, penalties, or other actions. Under the Privacy Act individuals have a right of protection, access to and correction of their personal information, or to file a complaint with the Privacy Commissioner of Canada regarding the handling of their personal information. Refer to Personal Information Bank CRA PPU 120 on Info Source at [canada.ca/cra-info-source](http://canada.ca/cra-info-source).

**Certification**

I certify that the information given on this form is correct and complete.

Signature \_\_\_\_\_

It is a serious offence to make a false return.

Date \_\_\_\_\_

XXXXXX



**Chignecto Central**  
Regional Centre for Education

**Human Resources Services**  
80 Lorne Street, Truro, Nova Scotia B2N 3K3  
Phone: 902-897-8900 Fax: 902-897-8948  
[www.ccrce.ca](http://www.ccrce.ca)

## Instructions for Vulnerable Sector Check

It is a Chignecto-Central Regional Centre for Education (CCRCE) Policy for each new employee to have a Vulnerable Sector Check completed.

1. Candidates for employment must obtain and submit to the Human Resources Services Department a completed Vulnerable Sector Check dated within the past 6 months. You must provide the original Vulnerable Sector Check. A photocopy will not be accepted.
2. Any fees as a result of the Police Check are the responsibility of the employee.



# Information for Individuals Applying for a Child Abuse Register Search

The Child Abuse Register contains the names of people that the provincial court or family court has found to have caused harm to a child. You can apply for a Child Abuse Register search to confirm that your name isn't in the register. If your name isn't found in the Child Abuse Register, you will receive a letter that you can share with CCRCE.

## How to Apply

### 1. Apply Online:

For the quickest processing time, applicants are encouraged to apply online:

<https://beta.novascotia.ca/apply-child-abuse-register-search>

When you apply online, you will need to upload a government-issued piece of identification, in PDF, JPG or PNG format. It should take 2-3 weeks to receive a confirmation letter in the mail.

### 2. Apply by Mail:

Child Abuse Register  
Department of Community Services  
P.O. Box 696  
Halifax, Nova Scotia  
B3J 2T7

If you are applying by mail, additional days need to be considered for mailing in the application. You are required to complete the full (paper) application. Failure to do so will result in your application being returned incomplete via mail for correction. All applications must include a photocopy of a valid Canadian identification in order for the search to be completed.

## Cost

There is no cost to apply.

## Contact information

For more information, please contact:

**Child Abuse Register Unit**  
**Phone: 902-424-6798**

*Inquiries about search results can only be provided to the applicant. The status of an application can only be provided after the search has been completed.*

**Child Abuse Register  
Request for Search (Form A)**

**1 Will you have contact with children under age 19?**

Yes, complete this form  No, do not complete this form. We cannot search the register for your name

We are authorized to search the Nova Scotia Child Abuse Register only if you have contact with children under the age of 19. Search results are for Nova Scotia only.

**2 Give your personal information (please print)**

Last name: \_\_\_\_\_ First name: \_\_\_\_\_  
Middle names: \_\_\_\_\_ Last name at birth: \_\_\_\_\_  
All other names during your lifetime: \_\_\_\_\_  
Commonly used names, nicknames, aliases: \_\_\_\_\_  
Date of birth (dd/mm/yyyy): \_\_\_\_\_ Gender  Male  Female  Transgender  
Health card number: \_\_\_\_\_ Drivers license master number: \_\_\_\_\_  
Current mailing address: \_\_\_\_\_ Apt/Unit #: \_\_\_\_\_  
City: \_\_\_\_\_ Postal Code: \_\_\_\_\_  
Phone: Home (xxx-xxx-xxxx): \_\_\_\_\_ Cell (xxx-xxx-xxxx): \_\_\_\_\_  
Are you a current or former resident of Nova Scotia?  Yes  No

**3 Attach photocopy to prove your identity**

Include proof of your identity. Attach a photocopy of your valid Canadian:  Driver's license,  Health card or  Passport  
If you do not have proof of your identity, please contact us at the number listed at the bottom of this form.

**4 Sign the request and certification**

Please confirm that my name is not entered in the Nova Scotia Child Abuse Register

I certify that the information given on this form is correct

Signature \_\_\_\_\_ Date (dd/mm/yyyy) \_\_\_\_\_

**5 Send the form to us**

Private and Confidential  
Child Abuse Register  
Department of Community Services  
P.O. Box 696  
Halifax, Nova Scotia B3J 2T7

We will send confirmation that your name does not appear on the register to the mailing address you gave above. You may share this letter with volunteer organizations and/or employers.

Questions? Call 902-424-6798

<p><b>For staff use only</b></p> <p><input type="checkbox"/> As of this date _____ the name of the above HAS NOT been entered in the Child Abuse Register</p> <p><input type="checkbox"/> Consent withdrawn by applicant</p> <p>Authorized signature: _____</p> <p>Certified by the Department of Community Services Child Abuse Register (Stamp)</p>
---

# Aesop

## Phone System Instructions for Substitutes

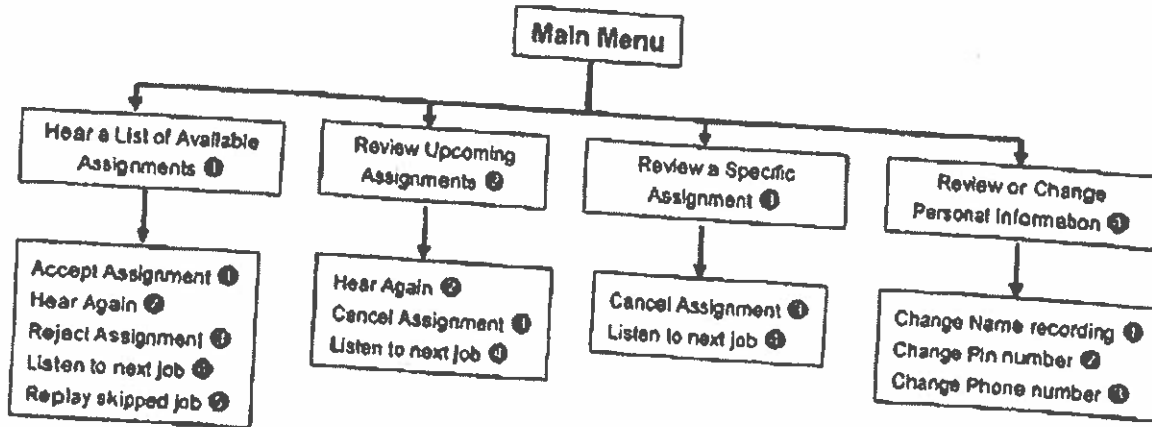
1-877-264-6562

### Learn how to

- Search for jobs by phone
- Respond when the system offers you a job
- Personalize the phone system

**FRONTLINE**  
TECHNOLOGIES • CANADA

[www.aesopcanada.com](http://www.aesopcanada.com)



## Aesop Phone Menu at a Glance

When you call Aesop



- To review or change your name recording, Press ①
- To change your Pin number, Press ②
- To change your phone number, Press ③

### Special Things to Note

When Aesop calls you:

- The phone number that appears on Caller ID is: 1-877-264-6562.
- Typically, Aesop will not leave a message on your home answering machine.
- Please say "hello" in order for Aesop to begin the phone call.
- If you are sick and wish not to work, Press ⑤ - To Prevent Further Calls Today.
- If two or more substitutes have the same phone number it is to your advantage that you both voice-record your names. Aesop will then play the voice recording at the beginning of the phone call and you can enter the correct Pin number.

1-877-264-6562



When you answer the phone, say "Hello" and Aesop will present the following options:



Aesop will play you the School District Name and the School Name.

Enter your Pin number followed by the pound key (#)

Aesop will now read off all the details of the assignment.

- To accept the assignment, Press 1
- To hear the assignment again, Press 2
- To reject but allow additional Calls today, Press 3
- To reject this assignment and prevent additional calls today, Press 4

When you have successfully accepted an assignment Aesop will play back the confirmation number.



If you select this option then Aesop will never call you again.



- 1 Dial 1.877.264.6562
- 2 Enter your ID number followed by the pound key (#)
- 3 Enter your PIN number followed by the pound key (#)

Pressing the star key (\*) will always take you back one menu level anywhere in the phone system.



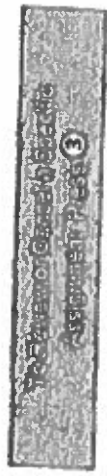
Aesop will play you a list of up to five available jobs

- To accept the assignment, Press 1
- To hear the assignment again, Press 2
- To reject this assignment and not hear it again, Press 3
- To listen to the next assignment, Press 4
- To replay a bypassed assignment, Press 5
- To return to the Main Menu, Press 6

When you have successfully accepted an assignment Aesop will play back the confirmation number.



- To review your assignments for the next 7 days, Press 2
  - To return to the previous menu, Press 3
- Aesop will now read off all the details of the assignment.
- To hear this again, Press 4
  - To cancel this assignment, Press 5
  - To listen to the next assignment, Press 6
  - To return to the Main Menu, Press 7



Aesop will ask you to enter the confirmation number.

- To cancel this assignment, Press 4
- To listen to the next assignment, Press 5
- To return to the Main Menu, Press 6

Please note that some options may not be available to you.



Regulars Pay Date	Work Dates		Regulars Paid in PP	Casuals/Subs Paid in PP	Casuals/Subs Pay Date
	Start	End			
August 11, 2022	7/31/2022	8/13/2022	16.2022	17.2022	August 25, 2022
August 25, 2022	8/14/2022	8/27/2022	17.2022	18.2022	September 8, 2022
September 8, 2022	8/28/2022	9/10/2022	18.2022	19.2022	September 22, 2022
September 22, 2022	9/11/2022	9/24/2022	19.2022	20.2022	October 6, 2022
October 6, 2022	9/25/2022	10/8/2022	20.2022	21.2022	October 20, 2022
October 20, 2022	10/9/2022	10/22/2022	21.2022	22.2022	November 3, 2022
November 3, 2022	10/23/2022	11/5/2022	22.2022	23.2022	November 17, 2022
November 17, 2022	11/6/2022	11/19/2022	23.2022	24.2022	December 1, 2022
December 1, 2022	11/20/2022	12/3/2022	24.2022	25.2022	December 15, 2022
December 15, 2022	12/4/2022	12/17/2022	25.2022	26.2022	December 29, 2022
December 29, 2022	12/18/2022	12/31/2022	26.2022	1.2023	January 12, 2023
January 12, 2023	1/1/2023	1/14/2023	1.2023	2.2023	January 26, 2023
January 26, 2023	1/15/2023	1/28/2023	2.2023	3.2023	February 9, 2023
February 9, 2023	1/29/2023	2/11/2023	3.2023	4.2023	February 23, 2023
February 23, 2023	2/12/2023	2/25/2023	4.2023	5.2023	March 9, 2023
March 9, 2023	2/26/2023	3/11/2023	5.2023	6.2023	March 23, 2023
March 23, 2023	3/12/2023	3/25/2023	6.2023	7.2023	April 6, 2023
April 6, 2023	3/26/2023	4/8/2023	7.2023	8.2023	April 20, 2023
April 20, 2023	4/9/2023	4/22/2023	8.2023	9.2023	May 4, 2023
May 4, 2023	4/23/2023	5/6/2023	9.2023	10.2023	May 18, 2023
May 18, 2023	5/7/2023	5/20/2023	10.2023	11.2023	June 1, 2023
June 1, 2023	5/21/2023	6/3/2023	11.2023	12.2023	June 15, 2023
June 15, 2023	6/4/2023	6/17/2023	12.2023	13.2023	June 29, 2023
June 29, 2023	6/18/2023	7/1/2023	13.2023	14.2023	July 13, 2023
July 13, 2023	7/2/2023	7/15/2023	14.2023	15.2023	July 27, 2023
July 27, 2023	7/16/2023	7/29/2023	15.2023	16.2023	August 10, 2023

Please keep this for your records for reference on when you will be paid for dates you have worked.