

BTA COMMITTEE APPLICATION FORM

| Name of Committee you are applying for: Name of Applicant: Personal Email Address: | | | |
|--|---|-------------|---------------------------------------|
| | | Home Phone: | School Phone: |
| | | School: | Teaching Experience in Burnaby: years |
| Current Assignment/Grade: | | | |
| Reason for Interest in this Committee | | | |
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| | : education, areas of interest, BTA/BCTF involvement) | | |
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| Signature: | Date: | | |

Please Fax (604-294-9846) or Email to the BTA Office (bta3@bctf.ca)