



APPENDIX II-6 DECLARATION OF EMPLOYMENT FORM

This form must be filled and handed in to the College at the time the professor submits his/her candidacy.

A. EXPLANATIONS

1. PROFESSIONAL ACTIVITY

This expression shall signify: a remunerated professional activity, carried out as an employee or as a self-employed person under contract or otherwise.

2. AVERAGE NUMBER OF HOURS PER WEEK

The average number of hours per week is not a determining factor. To learn if you are holding full-time employment, you must refer to item B.

3. CUMULATION OF EMPLOYMENT

All of your professional activities must be declared on this form. However, the cumulation of professional activities shall not result in a person being considered as holding full-time employment.

B. DEFINITION OF FULL-TIME EMPLOYMENT

Shall be considered as holding full-time employment:

1. Any person who, depending on the professional activity having been declared, does remunerated work for a length of time corresponding to the number of weekly or monthly hours done by persons holding similar full-time jobs, and this depending on what is generally recognized in their type of work;
 2. Any person who, while holding a full-time employment, is on a leave of absence with pay;
 3. Any person who, while holding full-time employment, is on availability with pay.
- Any person answering to one or more of the above criteria shall declare himself/herself as holding fulltime employment and shall be considered as being in a situation of double employment.

Only a person holding full-time employment or who expects to hold full-time employment during the entire semester for which he/she submits his/her candidacy, shall declare himself/herself as being in a situation of double employment.

For declaration form – see following page.



DECLARATION OF EMPLOYMENT

COLLEGE _____

DISCIPLINE _____ SEMESTER _____

IDENTIFICATION

Family Name _____ First Name _____

Address _____ Postal Code _____

Telephone (residence) _____ (office) _____

PROFESSIONAL ACTIVITIES

For every professional activity done during the semester, please give the following information:

Employer(s) Name(s) : _____

Title or function: _____

Average number of hours per week: _____

EMPLOYMENT SITUATION

Considering the definition of full-time employment (see item B), check one or the other of the following declarations:

I presently hold full-time employment and, consequently, I shall be in a double-employment situation.

I am not presently holding full-time employment and, consequently, I shall not be in a double-employment situation.

DATE _____ SIGNATURE _____