Science Venture, University of Victoria
T (250)721-8158 **F** (250)721-8676
E svprograms@uvic.ca
www.scienceventure.ca

Application Form Summer 2024

Please check your email regularly, as this is the primary form of communication from the Science Venture Office. All personal information collected is stored securely. Birthdate information is required to determine Canada Summer Jobs eligibility.

I am applying for the following YOUTH STEM INSTRUCTOR position(s):	
☐ Local Outreach Instructor	☐ Codemaker Instructor (Computer Science)

Full Name:	Pronouns:	Student #: (if applicable)
Phone Number:	Email:	Date of Birth: (mm/dd/yy)

What year of school are you currently completing?	Will this be a co-op position? ☐ Yes ☐ No	Major (& Minor, if applicable)

Are you able to drive in BC? With passengers?	☐ Yes ☐ No ☐ Yes ☐ No	Do you own/have daily access to a vehicle that you would be willing to use for work (reimbursement provided?) ☐ Yes ☐ No

Are you willing to travel to outlying communities (e.g. Sooke or North Island) to teach workshops and/or camps? ☐ Yes ☐ No	Are there any specific dates you would be unavailable to work between April 29th, 2024 and August 30th, 2024? Please list and describe the reason.

What age groups of youth have you worked with before?	☐ Pre-school (< 5 years) ☐ Elementary (K-5) ☐ Middle (6-8) ☐ High School (9-12)	What age groups of youth are you interested in working with?	☐ Elementary (K-5) ☐ Middle (6-8) ☐ High School (9-12) ☐ No preference
Why does this position interest you?		Briefly describe any classroom or camp teaching experience you have.	

Briefly design a theme day for a **science**, **technology, engineering**, or **math** camp. Include a minimum of 3 hands-on activities that would be delivered as part of the day.

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Reference List (3 referees required)	
Reference #1	*(Please ensure all contact information is up to date)*

Name:	Organization/Company:	
Relationship to you:	Type of Reference: ☐ Work ☐ Academic ☐ Character	
Phone number (daytime):	Phone Number (evening):	Email:

Reference #2

Name:	Organization/Company:	
Relationship to you:	Type of Reference: ☐ Work ☐ Academic ☐ Character	
Phone number (daytime):	Phone Number (evening):	Email:

Reference #3

Name:	Organization/Company:	
Relationship to you:	Type of Reference: ☐ Work ☐ Academic ☐ Character	
Phone number (daytime):	Phone Number (evening):	Email:

Application Procedure

All UVic co-op students must upload this application form, resume, and cover letter to the **Learning in Motion** (co-op portal) website. All other applicants, please submit this application form, resume, and cover letter by email to svprograms@uvic.ca. All applications are due no later than **10:00am, Thursday March 28th, 2024**.

All applications must include the following to be considered:
- ❑ application form
- ❑ cover letter
- ❑ resume

I certify that the information provided on, and attached to, this application form is correct and hereby authorize the University of Victoria Science Venture Program to contact any references or employers included within this application package to verify the information submitted, unless otherwise indicated.

Applicant Signature: _____
Date: