

Assistant's Name

 Title

School Board Trustees
 District Superintendent
 Secretary Treasurer

Office Staff		
	F/T	P/T
Clerical	2	1

Health & Safety
 Janine Schaefer
 Title
 School Nurse

NAME: Tim Jackson
TITLE: Building Supervisor

BLDG. MAINT. NAME			GROUNDS NAME			CONSTRUCTION NAME			CUSTODIAL NAME			TRANSPORTATION NAME		
Tim Jackson			Tim Jackson						Tim Jackson			Ralph Evans		
PERSONNEL			PERSONNEL			PERSONNEL			PERSONNEL			PERSONNEL		
	F/T	P/T		F/T	P/T		F/T	P/T		F/T	P/T		F/T	P/T
Carpenter		1							Custodial	2	6	Bus Drivers		5
Electrician		1												
Plumber		1												
email: tjackson@highroadacademy.com email: info@highroadacademy.com						Web Address: www.highroadacademy.com								

NAME: Highroad Academy **ZONE:** IV

ADDRESS: 46641 Chilliwack Central Road **City:** Chilliwack, BC **Postal Code:** V2P 1K3

Telephone: Board Office: 604-792-4680 Maintenance Office: Oper. Office:

Fax: Board Office: 604-792-2465 Maintenance Office: Oper. Office:

No. of Pupils 400 No. of Schools 1 No. of Portable 8 Teacherage _____

District Size _____ District Buildings _____ School Grounds _____
 (Hectares) (Sq. Meters) (Hectares)