

Date: _____

Employment Application

Position Preference	Substitute Preference			
AdministratorTeacherCoach	Catskill Elementary School (Pre K - 5)			
Teaching Assistant Nurse Substitute	Catskill Middle School (6-8)			
Support Staff: Position:	Catskill High School (9-12)			
Personal Info	rmation			
Name				
LAST	FIRST MIDDLE			
Permanent Mailing Address				
	Zip			
Email Phone	Cell			
Social Security Number				
Are you a U.S. citizen? The Yes The No If no, what visa do you possess?				
Have you ever been convicted of a crime? Yes No If yes, explain				
Have you been fingerprinted pursuant to Part 87 of the Regulations of the Commissioner of Education				
(<i>Criminal/History Record Check for Prospective School Employees & Applicants for Certification</i>)? □Yes □No Are you a dishonorably discharged veteran? □Yes □No □N/A Date of separation:				
Are you an exempt volunteer fireman? Yes No				

Certification/License

I hold the New York State certificate or licens Certificate or License	e described below. <i>Please provide original</i> . Type	Copies will be made at tin Effective Date	ne of application. Expiration Date (if applicable)	
Other license(s) held; type and issuing authority				

Educational Preparation

Name and Location of School	Nature of Studies	Did You Graduate (Y or N)	Degree Received
High School			
College (Undergraduate)*			
College (Graduate)*			
Vocational/Technical/Trade*			

*Provide Official Copy of Transcript

Work Experience

List most recent experience first. Complete address must be included.					
Dates Employed	Employer's Name/Address/Phone	Supervisor	Specific Nature of Position	Reason for Leaving	Current Salary/ Salary Upon Separation

Teaching or Administrative Experience

List most recent experience first. Include any substitute or part-time teaching. Complete address must be included.					
Dates Employed	Employer's Name/Address/Phone	Supervisor	Specific Nature of Position	Reason for Leaving	Current Salary/ Salary Upon Separation

Tenure Status

Were you ever appointed on tenure in a public scho	ol district in New York? Yes No If yes, complete the following.			
Tenure Area	_Effective Date			
Name and address of school district where tenure was granted:				
Were you ever denied tenure? □Yes □No	Were you ever found guilty of disciplinary charges pursuant to Education Law Section 3020a in any public school district? □Yes □No			

Professional and Scholastic Organizations, Memberships, Honors

Exclude organizations, the name or character of which indicates the race, creed, color or national origin of its members.

Other Skills and Abilities

For example: coaching, knowledge of sign language.

Professional References

List five individuals including supervisors having direct knowledge of your professional training, ability and experience Include the name, address, and telephone number of your last supervisor who may be contacted for a personal or professional reference. Do not list relatives and friends. Name Position Telephone, Mailing Address & Email				

Applicant's Statement

Give any additional information which you think might be of value in considering you for a position.

I certify that all statements made by me on this application are true and complete to the best of my knowledge. I understand that any false, misleading or omitted statements or documentation will be considered justification for disqualification of my application or termination of employment. I authorize an investigation of all statements herein and further authorize all cited references to give you any and all information they may have, and release all parties from all liability for any damage that may result from furnishing same to you. I authorize the Catskill Central School District for which I have completed an employment application to check my references, to obtain information from my former employers and educational institutions, to take other action to investigate any information provided in my employment application, and to obtain information relevant to evaluating my qualifications and fitness for a position. I authorize the school district to which this application is submitted to obtain information about my criminal record and authorize all government agencies to provide information hereby release the Catskill Central School District for any such information, and without limitation hereby release the Catskill Central School District and the reference source from any liability in connection with its release or use.

If offered employment by this school district, I certify that I have not already accepted an offer of employment from another school district. I am committed to fulfilling the obligations of this employment offer.

Applicant's Signature

Date

The Catskill Central School District does not discriminate on the basis of sex, race, color, creed, national origin, religion, age, disability, sexual orientation, marital status, veteran status, or genetic predisposition for carrier status in their recruitment, employment, admissions practices, vocational opportunities or access to and treatment in programs or activities in accordance with Title IX, Section 504 of the Rehabilitation Act of 1973, Title VI and Title VII of the Americans with Disabilities Act. If you believe you have been subject to discrimination, please contact the EEO officer of the school district.

Applicant's Signature

Date

Completed applications may be emailed online or by mail:

njubie@catskillcsd.org

Office of the Superintendent, Catskill Central School District, 343 West Main Street, Catskill, NY 12414