



Schuylerville Central School District  
**Application for Employment**  
Teaching & Administration

**Areas of Interest (List by preference)**

*Subject Area*

*Grade Level*

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_

**Personal Information**

Name: \_\_\_\_\_  
*First Middle Last*

Provide any other names used: \_\_\_\_\_

Permanent Address: \_\_\_\_\_

Telephone #: \_\_\_\_\_ Social Security #: \_\_\_\_\_

All candidates for employment must be eligible for employment in the United States and maintain this eligibility throughout their employment. Employment is contingent upon the provision of proof of the right to accept employment in the United States.

Are you a citizen of the United States? Yes  No

Are you legally authorized to work in the United States? Yes  No

Will you now, or in the future, require sponsorship for employment visa status? Yes  No

Amount of working time lost due to absence in the last two years: \_\_\_\_\_

Reason for absence: \_\_\_\_\_

**Certification Information**

List all valid New York State teaching or administrative certificates you presently hold.

Subject Area/Grade Level	Certificate #	Type (Perm./Prov.)	Date of Exp.
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

If you presently hold certification in other states, please list:

Have you previously received tenure in another New York State School District? Yes  No

If yes, what school district? \_\_\_\_\_

Are you a member of:

New York State Teachers Retirement System: Yes  No  Retirement # \_\_\_\_\_

Other System : \_\_\_\_\_ Yes  No  Retirement # \_\_\_\_\_

### Educational Preparation

#### **High School**

Name & Location of school: \_\_\_\_\_

Dates Attended: \_\_\_\_\_

Nature of Studies: \_\_\_\_\_

Major/Minor: \_\_\_\_\_

Diploma or Degree: \_\_\_\_\_

Date Granted: \_\_\_\_\_

#### **College (Undergraduate)\***

Name & Location of school: \_\_\_\_\_

Dates Attended: \_\_\_\_\_

Nature of Studies: \_\_\_\_\_

Major/Minor: \_\_\_\_\_

Diploma or Degree: \_\_\_\_\_

Date Granted: \_\_\_\_\_

Have you taken work that has resulted in the conferring of an advanced degree? If so, summarize.\* (Major Specialization/Number of Credits)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Graduate work taken beyond the highest degree earned.\* (Indicate major concentrations - If possible, number of credits)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\*A transcript of all college work may be requested.

#### **Scholastic Honors/Professional Achievements:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

List college placement office, address and phone number where your confidential record may be obtained.

\_\_\_\_\_  
\_\_\_\_\_

### Educational Experience

Please list most recent FULL TIME teaching experiences first (do not include per diem substitute experience). If fewer than three years of regular FULL TIME teaching experience, include student teaching and indicate as such.

<i>School District Name/Address/Phone/Supervisor</i>	<i>From/To Mo/Yr – Mo/Yr</i>	<i>Position Held Subject Area/Grade Level</i>	<i>Tenure Granted?</i>	<i>Reason for Leaving</i>

### Other Professional Experiences

(Business, Trades, Summer Occupations, Publications, Lecturing)

<i>Dates</i>	<i>Firm or Institution</i>	<i>Nature of work</i>	<i>Full-Time Employment</i>	<i>Evenings/Weekends/Summers/ Vacations, etc.</i>

United States Armed Service Record:

Branch of Service: \_\_\_\_\_ From: \_\_\_\_\_ To: \_\_\_\_\_

Highest Rank: \_\_\_\_\_ Type of Discharge: \_\_\_\_\_

## References

Give names of those who have closely observed your work as a teacher or as a student. Do not include letters of reference. In the case of experienced teachers or supervisors, present and former superintendents, principals and other supervisors are preferred. Beginning teachers, please include the names of practice teaching supervisors. 2 references are required.

<i>Name</i>	<i>Present Address City, State, Zip</i>	<i>Area Code &amp; Telephone Number</i>	<i>Position</i>	<i>May we contact this individual?</i>

If you are currently teaching, why do you wish to leave your present position?

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Were you previously employed by this district? Yes  No  Dates employed: \_\_\_\_\_

Have you applied for a position in this district previously? Yes  No

If yes, when and for what position? \_\_\_\_\_

Do you have any relatives employed by the district? Yes  No

Name of relative(s): \_\_\_\_\_

Have you ever been disciplined, discharged, or resigned in lieu of facing discipline? Yes  No

If yes, please explain. \_\_\_\_\_

\_\_\_\_\_

## Related Professional Experiences and Interests

What sports do you feel competent to coach? \_\_\_\_\_

What foreign language(s) do you speak or read? \_\_\_\_\_

Describe any special hobbies or skill that may be pertinent. \_\_\_\_\_

What clubs or extracurricular activities can you supervise or sponsor? \_\_\_\_\_

I affirm that all statements made on this form, including any accompanying papers, are true, accurate and complete to the best of my knowledge under penalty of perjury. I further authorize investigation of said statements. Verification of information may be required prior to appointment to any position. I understand that any false, incomplete or misleading statements made on this form or accompanying papers may nullify my appointment or lead to my termination.

I authorize investigation and verification of all statements contained in this application for employment. I further authorize any former employer, military records center, and any former school, college, university or organization to provide Schuylerville Central School District with any and all information including, but not limited to, information as to my character, work habits, work performance, education, qualifications, and fitness for the position, thereby releasing and discharging said institutions from any claims, liabilities, or damages incurred in furnishing such information.

I agree to take a physical examination and recognize that any offer of employment may be contingent upon the results of such an examination, and I am willing to have this application notarized if I am to be hired.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

*Schuylerville Central School District is an Equal Opportunity/Affirmative Action employer. All qualified applicants will receive consideration for employment without regard to race, color, gender, national origin, age, religion, creed, disability, veteran's status, sexual orientation, gender identity, gender expression or any other characteristic protected by law. If you wish to request a reasonable accommodation during the application process or to participate in a job interview, please contact [tompkinsj@schuylerville.org](mailto:tompkinsj@schuylerville.org) or 518-695-3255 x3242.*

**Please return completed application to: Superintendent of Schools,  
Schuylerville Central School District, 14 Spring Street, Schuylerville, NY 12871**