Application for Employment



15611 State Highway 23 Davenport, NY 13750 www.charlottevalleycs.org

Personal Information

Full Name:		Date:	
Address:			
Email:		Phone:	
Position Informatio	n		
Position Applied For:			
Type of Employment	Full-time	Part-time	Temporary
Date Available to Start	:		
Educational Backgr	ound		
Degree Institution		Year of Com	pletion
Employment Histor	ъ		
Company Name	Job Title	Responsibilities	Work Duration
Company Name	Job Title	Responsibilities	Work Duration
Company Name	Job Title	Responsibilities	Work Duration
Attachments:	Resume/CV Attachme	ent Cover Lette	r Attachment

Charlotte Valley Central School



15611 State Highway 23 Davenport, NY 13750 www.charlottevalleycs.org

Certification/Professional License

I hold the New York State Teaching/Administrative Certificate(s) described below:

Certificate Title						
Certificate Type			Date Issued			
If you do not have a	NYS Teaching	Certificate, have you ap	oplied for one?	Yes	No	
Tenure Area						
Were you ever app	pointed to te	nure in a public schoo	ol district in Nev	w York St	ate?	
Area		Date Granted				
References						
Name			Telephone			
Position			Email			
Address						
			May we contact	ct?		
Name			Telephone			
Position			Email			
Address						
			May we contact	ct?		
Name			Telephone			
Position			Email			
Address						
			May we contact	ct?		

Charlotte Valley Central School



15611 State Highway 23 Davenport, NY 13750 www.charlottevalleycs.org

References Continued

Name of the judge:

Name		Telephone			
Position		Email			
Address					
		May we cont	act?		
Background Information					
Veteran of U.S. Military	: Discharç	ge type:			
Branch:	Discharge Date:				
Have you ever been f	ingerprinted for the purpose of emplo	pyment?			
If yes, where?	When?				
Have you ever been o	cleared by NYSED for teaching?				
Are you legally eligibl	e for employment in this country?				
Have you ever forfeited	bail or bond following your appearance a	s a defendant in a cri	minal court action?		
Have you ever received an unsatisfactory rating in conjunction with any pedagogical employment?					
Have you ever been disc	qualified for employment for any civil serv	ice position?			
Have you ever been dise	charged or required to resign from any po	osition (other than sta	ff reduction layoffs)?		
Have you ever been fou under Section 3020-a o	ınd guilty and/or have you ever pleaded g f the Education Law or Section 75 of the C	uilty to disciplinary ch ivil Service Law?	arges brought against you		
Have you ever resigned	as an alternative to facing charges or disn	nissal?			
Have you ever had a lice medical record?	ense of certificate denied or terminated be	ecause of unsatisfacto	ory teaching, fingerprints, or		
Have you ever had any agency as a result of yo	professional certificate or license denied, ur record?	revoked, or suspende	ed by any government		
Has a Family Court or any other court ever rendered a finding indicating that you have abused or neglected a child? (If yes, complete the confidentially held information below)					
Date and nature of the f	inding:				
Name of the court:					

Applicants Statement

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 or misleading statements 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 that may result from furnishing same to you. I authorize any participating school district for which I have completed and employment application to check my references, to obtain information from my former employers and educational institutions, to take further 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 any school district to which this application is submitted to obtain information about my criminal record and authorize all government agencies to provide information about my criminal record to the school district.

I understand that any omissions on this application may prevent my application from being evaluated or referred to a school district and that any misrepresentation, falsification or omission on this application or on other documents submitted to the school district will be sufficient cause for this application not to be considered by the school district, not to be referred to a school district, or for discharge if i have been employed.

Applicant's Signature	
	Applicant's Signature