

**Substitute Application for ONC BOCES  
Substitute Teacher Registry  
PO Box 382, 2020 Jump Brook Road, Grand Gorge, NY 12434**

Last Name  First Name  MI  Phone Number

Address  City  State  Zip Code

Social Security Number\*  \*SSN Not Required on initial submission It will be once you are selected as a Substitute. Email Address

**Education (Please check all that apply):**  H.S.  A.S.  B.A.  M.A. Degree/Total Credit Hours

**Indicate days available:**  M  T  W  T  F  All

**Check School Districts in which you would substitute:**

School Districts		BOCES Centers		BOCES Classrooms in School Districts	
<input type="checkbox"/> Charlotte Valley CSD	<input type="checkbox"/> Stamford CSD	<input type="checkbox"/> NCOC - Special Ed.	<input type="checkbox"/> Center Street - Special Ed		
<input type="checkbox"/> Edmeston CSD	<input type="checkbox"/> Windham-Ashland-Jewett	<input type="checkbox"/> NCOC - Career & Tech.			
<input type="checkbox"/> Milford CSD	<input type="checkbox"/> Worcester CSD	<input type="checkbox"/> OAO - Special Ed.			
<input type="checkbox"/> Oneonta City SD		<input type="checkbox"/> OAO - Career & Tech.			
<input type="checkbox"/> Schenevus CSD					

Teacher Certification:	Area/Grade Level	Type (Select in drop down menu)	Expiration Date

**Retirement:** Are you a member of the New York State Teacher Retirement System? (Choose Yes or No)  New York State Employee Retirement (Choose Yes or No)

If Yes, give Retirement Number

**Employment History:**

Have you ever been a substitute for ONC BOCES or applied before (Choose Yes or No)  If Yes, give dates

Have you ever been hired by ONC BOCES as an Employee? (Choose Yes or No)  If Yes, give dates

*The Board of Cooperative Educational Services of the Sole Supervisory District of Otsego, Delaware, Schoharie and Greene Counties does not discriminate on the basis of race, color, national origin, sex, sexual orientation, disability, genetic disposition or age in the educational programs or activities which it operates, including, but not limited to, access to facilities in accordance with the Boy Scouts of America Equal Access Act of 2001, 20 U.S.C. 7905, which requires equal access for the Boy Scouts of America and other designated youth groups to meet at public schools.*

**Education**

Name and Address of Insitutions Attended (include high school, college, and graduate schools)	From	To	Major	Completed Credit Hours Date Degree Issued

**Work History**

**This section must be completed, resume is not sufficient**

Name of Employer (Most Recent First)	Direct Supervisor	City & State	Telephone	Position and Nature of work	From/To	Reason for Leaving

Please Explain Reasons for any gap in Employment:

**Student Teaching**

Name and Address of School	Cooperating Teacher	Telephone	Subject and Grade	From	To

**Professional Teaching Experience**

Name and Address of School	Immediate Supervisor	Telephone	Subject & Grade	From/To	Reason For Leaving

Have you Received TENURE in a School District?  District  TENURE Area  Effective Date

**Professional References**

**List below three persons who have knowledge of your work performance that are not related to you (Preferably past or present supervisors)**

Name	Address	Phone	How Known

Please complete a brief essay describing your qualities and experiences that would qualify you to be selected as a substitute with ONC BOCES:

### Moral Character Determination

Answer each question by Selecting "Yes" or "No." If you answer "yes" to any question, you are required to give a full explanation of your answer in the space provided below.

- A. Have you ever been dismissed, resigned from, entered into a settlement agreement, or otherwise left employment to avoid investigation and/or dismissal from alleged misconduct? A.  No  Yes
- B. Did you ever receive a discharge from the Armed Forces of the United States, which was other than "Honorable?" B.  No  Yes
- C. Have you been convicted of any criminal offense in NYS or any jurisdiction outside the State? (Other than minor traffic violations) C.  No  Yes
- D. Do you currently have any criminal charges pending against you? D.  No  Yes
- E. Have you ever had an application for a teaching credential in New York or any other jurisdiction denied? E.  No  Yes
- F. Have you ever had a teaching credential issued in New York or any other jurisdiction revoked, suspended, or otherwise invalidated? F.  No  Yes
- G. Have disciplinary proceedings ever been initiated against you pursuant to New York State Education Law Section 3020-a or the disciplinary provisions of any other jurisdictions? G.  No  Yes

1. Give a full explanation for any "yes" answer indicated above.

2. Please Attach official copies of the court record(s) including disposition of the case.

Have you been previously fingerprinted pursuant to Part 87 of the Regulations of the Commissioner of Education? (Criminal History Record Check for Prospective School Employees and Applications for Certification).  No  Yes

### THE SUBSTITUTE TEACHER REGISTRY IS A SHARED PLACEMENT SERVICE OPERATED BY THE ONC BOCES, AND AS SUCH DOES NOT ACT AS AN EMPLOYER OF SUBSTITUTES

I hereby affirm that the information provided on this application (and accompanying resume, if any) is true and complete to the best of my knowledge. I acknowledge that any false or misleading information, or significant omissions, may disqualify me from further consideration for employment or be considered grounds for dismissal, if investigated and/or discovered at a later date. I authorize ONC BOCES to investigate and obtain copies of records relating to my employment history, education, and criminal history as required by the New York State Education Department. I authorize the BOCES to investigate any other information provided in connection with this application or my employment in all participating districts through the ONC BOCES Substitute Teacher Registry; I agree to cooperate in such investigation; I authorize all former employers and educational institutions to provide job-related information to the BOCES, and to any of the 5 component districts; and I release former employers and educational institutions, and the BOCES and it's districts from all liability or responsibility for supplying or requesting such information as part of such an investigation.

By Checking this Box and typing your name in the box below you acknowledge that the information is true.

Applicant's Signature

Date

## Check Subjects Areas You Will Cover

Elementary Positions	Secondary Positions	BOCES Positions	
<input type="checkbox"/> Elementary Art	<input type="checkbox"/> Agriculture	<input type="checkbox"/> Automotive Service Center Technician	
<input type="checkbox"/> Elementary Grades 1-3	<input type="checkbox"/> Art K-12	<input type="checkbox"/> Building Trades	
<input type="checkbox"/> Elementary Grades 4-6	<input type="checkbox"/> Biology K-12	<input type="checkbox"/> Cosmetology	
<input type="checkbox"/> Elementary Music	<input type="checkbox"/> Business & Distributive Education	<input type="checkbox"/> Culinary Arts	
<input type="checkbox"/> Elementary Physical Ed.	<input type="checkbox"/> Chemistry 7-12	<input type="checkbox"/> Equipment Operations & Repair	
<input type="checkbox"/> Elementary Special Ed.	<input type="checkbox"/> Computer Instructor	<input type="checkbox"/> Information Technology	
<input type="checkbox"/> Gifted & Talented	<input type="checkbox"/> Earth Science 7-12	<input type="checkbox"/> Natural Resource Operations	
<input type="checkbox"/> K-6 Teacher Floater	<input type="checkbox"/> English 7-12	<input type="checkbox"/> New Visions - Medical Professions	
<input type="checkbox"/> Kindergarten	<input type="checkbox"/> Family & Consumer Science	<input type="checkbox"/> New Visions - Pre-Engineering	
<input type="checkbox"/> Pre-Kindergarten	<input type="checkbox"/> French 7-12	<input type="checkbox"/> Visual Arts/Media Technology	
<input type="checkbox"/> Reading	<input type="checkbox"/> General Science 7-12	<input type="checkbox"/> Visual Communications/Graphic Arts	
<b>TA &amp; AIDE POSITIONS</b>			
<input type="checkbox"/> School Aide (Cafeteria)	<input type="checkbox"/> German 7-12	<input type="checkbox"/> Welding	
<input type="checkbox"/> School Monitor	<input type="checkbox"/> Health	<input type="checkbox"/> Alternative Education	
<input type="checkbox"/> Teacher Aide-Elem Spec Ed	<input type="checkbox"/> ISS Teacher	<input type="checkbox"/> Basic Academic (BAP)	
<input type="checkbox"/> Teacher Aide-Elementary Ed	<input type="checkbox"/> Latin 7-12	<input type="checkbox"/> Career Pathways (I-IV)	
<input type="checkbox"/> Teacher Aide Secondary Sp Ed	<input type="checkbox"/> Mandarin Chinese	<input type="checkbox"/> HS Basic Academic (BAP) Grades 10-12	
<input type="checkbox"/> Teacher Aide Secondary Ed	<input type="checkbox"/> Math 7-12	<input type="checkbox"/> Behavior Adjustment (BA/Basic Life Skills)	
<input type="checkbox"/> Teacher Assistant-Elem Sp Ed	<input type="checkbox"/> Music - Instrumental	<input type="checkbox"/> HS Behavior Adjustment (BA) Grades 10-12	
<input type="checkbox"/> Teacher Assistant Elementary	<input type="checkbox"/> Music - Vocal	<input type="checkbox"/> High School Trust	
<input type="checkbox"/> Teacher Assistant-Sec Spec Ed	<input type="checkbox"/> Physics 7-12	<input type="checkbox"/> High School Therapeutic Learning Center (TLC)	
<input type="checkbox"/> Teacher Assistant - Secondary	<input type="checkbox"/> Reading K-12	<input type="checkbox"/> Intermediate High School Behavior Adjustment/BA/Gr.4-6	
<b>Clerical Positions</b>			<input type="checkbox"/> Middle School Behavior Adjustment (BA) Gr.7-9
<input type="checkbox"/> Clerk	<input type="checkbox"/> School Media Specialist (Librarian)	<input type="checkbox"/>	
<input type="checkbox"/> Typist	<input type="checkbox"/> Secondary Physical Education	<input type="checkbox"/>	
<input type="checkbox"/> Telephone Operator	<input type="checkbox"/> Secondary Special Education	<input type="checkbox"/>	
<b>Nurse Positions</b>			<input type="checkbox"/>
<input type="checkbox"/> RN	<input type="checkbox"/> Social Studies 5-9	<input type="checkbox"/>	
<input type="checkbox"/> LPN	<input type="checkbox"/> Social Studies 7-12	<input type="checkbox"/>	
<input type="checkbox"/> School Nurse	<input type="checkbox"/> Spanish	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/> Special Education Floater	<input type="checkbox"/>	
	<input type="checkbox"/> Speech & Hearing Handicapped	<input type="checkbox"/>	
	<input type="checkbox"/> Technology	<input type="checkbox"/>	
	<input type="checkbox"/> 7-12 Teacher Floater	<input type="checkbox"/>	
		<input type="checkbox"/>	
		<input type="checkbox"/>	

BOCES CTE positions: (List Experience)

Instructions for submitting this form via email: Submit via the email button. If you are unable to do so save the form on your computer and send via an attachment to the email address as indicated below