

Educational Information

Name & Location of School *Dates Attended* *Nature of Studies* *Diploma or Degree* *Date Granted*

High School

College

U.S. Armed Services Record

Branch of Service *From* *To* *Highest Rank* *Type of Discipline*

Work Experience

Please list most recent FULL TIME position first. May we contact your present employer? Yes No

Employer Name and Address: _____

Employment Dates: _____

Immediate Supervisor: _____ Phone: _____

Type of work and duties: _____

Reason for Leaving: _____

Employer Name and Address: _____

Employment Dates: _____

Immediate Supervisor: _____ Phone: _____

Type of work and duties: _____

Reason for Leaving: _____

Employer Name and Address: _____

Employment Dates: _____

Immediate Supervisor: _____ Phone: _____

Type of work and duties: _____

Reason for Leaving: _____

Were you previously employed by the district? Yes No Dates employed: _____

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

Name of relatives(s): _____

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

If yes, please explain. _____

If the position you are applying for involves operating a school vehicle at any time, please provide the following information: Type of License: _____ ID# _____

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 or 518-695-3255 x3242.

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