PROFESSIONAL EXPERIENCE *(Please list most recent first)*

Name of School	Address and Phone Number	Subject and Grade	Immediate Supervisor	From	To	Reason For Leaving	Salary

Have you received tenure in another school district? **Yes** **No** *(Circle One)*

If Yes, please indicate the address and phone number of the district(s)

_____ **Effective Date** _____

_____ **Tenure Area** _____

_____

OTHER WORK EXPERIENCE

Name of School	Address and Phone Number	Subject and Grade	Immediate Supervisor	From	To	Reason For Leaving	Salary

CERTIFICATION DETAILS *(Please enclose copies)*

Area/Grade Level(s)	Type *(CQ, Prov, Perm)*	Issuing State	Date Received	Valid Until	Certificate Number

REFERENCES

(Please list references who would have knowledge of your qualifications for position)

Name	Address and Phone Number	Position

CHECK THE APPROPRIATE BOX FOR EACH QUESTION	YES	NO
Were you ever dismissed or discharged from any employment for reasons other than abolition of position?	❑	❑
Did you ever receive a discharge from the Armed Forces of the United States which was other than "honorable" or which was issued under other than honorable circumstances?	❑	❑
Have you ever been convicted of a felony?	❑	❑
Are you now under charges for any crime?	❑	❑

If you answered "yes" to any of the questions above, you may give specifics in the space provided below or attach a separate statement. If you elect not to provide specifics or if such explanation is insufficient, you may be required to submit further information.

None of the above circumstances represents an automatic bar to employment. Each case is considered and evaluated on individual merits in relation to the duties and responsibilities of the position(s) for which you are applying.

IN YOUR OWN HANDWRITING, PLEASE USE THE SPACE BELOW TO BRIEFLY STATE ANY ADDITIONAL INFORMATION WHICH WILL HELP US TO KNOW YOU BETTER.

THE NEW YORK STATE HUMAN RIGHTS LAW PROHIBITS DISCRIMINATION IN EMPLOYMENT BECAUSE OF AGE, CREED, COLOR, NATIONAL ORIGIN, SEX, DISABILITY, MARITAL STATUS, OR CRIMINAL RECORD. ACCORDINGLY, NOTHING IN THIS APPLICATION FORM SHOULD BE VIEWED AS EXPRESSING, DIRECTLY OR INDIRECTLY, ANY LIMITATION, SPECIFICATION, OR DISCRIMINATION AS TO AGE, RACE, CREED, COLOR, NATIONAL ORIGIN, SEX, DISABILITY, MARITAL STATUS, OR CRIMINAL RECORD IN CONNECTION WITH EMPLOYMENT.

FORT ANN CENTRAL SCHOOL DISTRICT
Catherine Street • Fort Ann, New York 12827
Phone (518) 639-5594 • Fax (518) 639-8911
www.fortannschool.org

APPLICATION FOR EMPLOYMENT

INSTRUCTIONS:

1. **Please complete all items on this application form and include a resume.**
2. **Print all information, unless requested otherwise.**

Note: Applications are kept on file for one year following the filing date.

DATE: _____

APPLICATION FOR POSITION AS: *(Position(s) desired in order of preference)*

1. _____ 2. _____ 3. _____

PERSONAL DATA:

Name: _____ Permanent Address: _____
(Last) (First) (Middle) *(if different than current address)*

Current Address: _____ Phone: (_____) _____
(Street) (City) (State) (Zip Code) *Area Code*

Social Security Number: _____ Date of Birth *(Optional)*: _____

PROFESSIONAL TRAINING *(Please list most recent first)*

NAME AND ADDRESS OF INSTITUTIONS ATTENDED *(Include high school, colleges and graduate schools)*	FROM	TO	MAJOR	SEMESTER HOURS	DEGREE

STUDENT TEACHING OR INTERNSHIP EXPERIENCE

NAME OF SCHOOL	ADDRESS	SUBJECT AND/OR GRADE	IMMEDIATE SUPERVISOR	FROM	TO