

Brittonkill Central School District

3992 NY 2 – Troy, New York 12180

(518) 279-4600

Application for Annual and Special Appointments

NAME _____ Email: _____

ADDRESS _____

TELEPHONE NO. _____ SOCIAL SECURITY NO. _____

LIST THE POSITION FOR WHICH YOU ARE APPLYING

ARE YOU CURRENTLY A BRITTONKILL EMPLOYEE? (OTHER THAN ATHLETIC COACH) Yes No

If yes, please list your position _____

If no, please list your employment history, beginning with your most current employer.

Employer

Position

Dates

EDUCATION

Name of School

Attended

Year Graduated

Major

Degree

HighSchool _____

CERTIFICATION

Certification Area

Type

Identification Number

Expiration Date

Note: Attach a copy of all certifications to this application.

For coaching include a copy of valid certification in First Aid, CPR and Identification and Reporting Child Abuse.

1. Are you able to perform the essential tasks of the job for which you are applying? ☐ Yes ☐ No
2. Have you ever been convicted of an offense other than a minor traffic violation? ☐ Yes ☐ No
(DUI and DWI are not minor and must be reported)
3. Have you ever been convicted of a felony? ☐ Yes ☐ No
4. Have you ever been convicted (even if no contest or charges dropped or pled down) ☐ Yes ☐ No
of a sex-related offense?
5. Have you ever been convicted (even if no contest or charges dropped or pled down) ☐ Yes ☐ No
of a drug-related offense?
6. Have you ever been convicted for an act of violence, including domestic violence? ☐ Yes ☐ No
7. Has your professional license ever been revoked? ☐ Yes ☐ No
8. Have you ever been discharged or separated from a position with a school district ☐ Yes ☐ No
or been asked to resign a licensed arrangement?
9. Have you ever had sanctions placed on your teaching certificate for any reason? ☐ Yes ☐ No
10. Have you ever been denied a teaching certificate anywhere? ☐ Yes ☐ No
11. Is disciplinary action currently pending anywhere against your certificate? ☐ Yes ☐ No

If you have answered "yes" to any of the above (except #1), please provide complete details below.

References (At Least Three)

Name/Title

Institution – Address

Telephone

Signature: _____

Date: _____