



# PALMYRA SCHOOL DISTRICT PALMYRA, NJ 08065

An Equal Opportunity/Affirmative Action Employer

Return application to:  
Personnel Officer  
301 Delaware Avenue  
Palmyra, NJ 08065

## EMPLOYMENT APPLICATION

**Please Note:** Information contained herein may be relied upon and may become a legal part of any contract if offered. ALL blanks must be completed. Requests for information which do not apply should be marked N/A.

Name \_\_\_\_\_ Date \_\_\_\_\_

Current Address \_\_\_\_\_ Phone \_\_\_\_\_

\_\_\_\_\_  
Last 4 SSN \_\_\_\_\_

Email Address \_\_\_\_\_ DOB \_\_\_\_\_

**POSITION DESIRED:** \_\_\_\_\_  
*(name of position as advertised)*

Date Available for Employment or Notification Requirement (days) \_\_\_\_\_

Current Position \_\_\_\_\_ Current Employer \_\_\_\_\_

Current Employer Address \_\_\_\_\_

May we contact your current employer prior to a job offer?  Yes  No Employer Contact \_\_\_\_\_

Current Salary \$ \_\_\_\_\_ Minimum Salary Requirement \$ \_\_\_\_\_ New Jersey Resident?  Yes  No

## WORK EXPERIENCE: NON-CERTIFICATED POSITIONS

*Certificated personnel please complete the Education Experience section*

Employer	Address	Dates m/y to m/y	Reason for Leaving

## EDUCATION

*Transcripts must be provided confirming degree earned and number of credits completed per degree (undergraduate and post-graduate)*

Name of Institution	Graduation Date	HS Diploma or College Degrees	# of Credits Earned Post-Degree <i>If applicable</i>

## CERTIFICATION

*Must be completed by all certificated personnel*

Certification	Type (CE, Standard, etc)	State	Date Issued	Expiration Date (If Applicable)

New Jersey Certified?    Yes    No

## EDUCATION EXPERIENCE

*To be completed by certificated staff and other positions (paraprofessional, coach, etc.) with prior school district experience.*

Name of School District	Address	Position	Dates m/y to m/y	Reason for Leaving

## STUDENT TEACHING RECORD

*Please complete if you have less than three (3) years of teaching experience*

Name of School District	Address (city, state)	Grade or Subject	Dates m/y to m/y	Cooperating Teacher

## VOLUNTEER ORGANIZATIONS/CLUB/ACTIVITIES

Name of Organization/Club	Address (city, state)	Your position/role/involvement

## MILITARY SERVICE

Branch	Rank	Status (Active/Retired)	Dates m/y to m/y

Are you currently serving in the Reserves?    Yes    No