Downsville Central School District

PO Box J – 14784 State Highway 30

Downsville, NY 13755

APPLICATION FOR EMPLOYMENT

All applicants are considered without regard to race, color, religion, gender, national origin, age, disabilities, martial or veteran status

Personal Information

Name: Social Security #:

Address: Home Phone #:

 Cell Phone #:

Position Applying for: Date of Application:

\_\_\_ Full Time \_\_\_\_ Substitute Availability Date:

Have you been 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? \_\_\_ Yes \_\_\_ No Where When

Education

High School: Diploma Earned: \_\_\_ Yes \_\_\_ No

Vocational/Technical Training: Certificate Earned: \_\_\_ Yes \_\_\_ No

College: Major:

Semester Hours: Years Completed: Degree Earned: \_\_\_ Yes \_\_\_ No

Employment History

**Employer**: Address:

Dates Employed: From to

Position held: Phone:

Supervisor: Supervisor’s Title:

Duties:

If no longer employed, reason for leaving:

May we contact for a reference: \_\_\_ Yes \_\_\_ No \_\_\_\_ At a later date (when?)

**Employer**: Address:

Dates Employed: From to

Position held: Phone:

Supervisor: Supervisor’s Title:

Duties:

If no longer employed, reason for leaving:

May we contact for a reference: \_\_\_ Yes \_\_\_ No \_\_\_\_ At a later date (when?)

References (please give complete addresses)

List three (3) individuals having personal knowledge of your professional abilities, character and experience.

**Name**: Address:

Phone: (H) (C)

**Name**: Address:

Phone: (H) (C)

**Name**: Address:

Phone: (H) (C)

Other Information

Have you ever been released or asked to resign from an employment position? \_\_\_ Yes \_\_\_No

If yes, please explain:

Have you ever been convicted of a criminal violation, excluding minor traffic offenses? \_\_\_ Yes \_\_\_No

If yes, please explain:

Have you ever served in the United States Armed Forces? \_\_\_ Yes \_\_\_No

If yes, please explain:

Were you honorably discharged from the Unites States Armed Forces? \_\_\_ Yes \_\_\_No

If yes, please explain:

Are you legally eligible for employment in this country? \_\_\_ Yes \_\_\_No

Personal Statement

Give any additional information which you think might be of value in considering you for a position in the district.

I hereby certify that the facts set forth in the above employment application are true and complete to the best of my knowledge. I further acknowledge that any falsification or omission will be sufficient cause for disqualification or dismissal, if employed, regardless of when discovered.

I give the Employer the right to investigate all references and to secure additional information about me, if job related. I hereby release from liability the Employer and its representatives for seeking such information and all other persons, corporations or organizations for furnishing such information.

The Employer is an equal opportunity employer. The Employer does not discriminate in employment and no question on this application is used for the purpose of limiting or excluding any applicant’s consideration for employment on a basis prohibited by local, state or federal law.

This application is current for one year. At the conclusion of this time, if I have not heard from the Employer and still wish to be considered for employment, it will be necessary for me to fill out a new application.

Signature of Applicants: Date: