



Classified Employment Application

East Irondequoit Central School District,
600 Pardee Road, Rochester, New York 14609 (585) 339-1200

Personal Information			
Last Name	First Name	Middle Name	
Street Address	City	State	Zip Code
Telephone Numbers. Home: _____		Application Date: _____ / / Business: _____	

Position(s) Desired: _____

Expected Salary \$ _____

Are you prevented from lawfully becoming employed in this country because of Visa or Immigration Status? ___ Yes ___ No

Proof of citizenship or immigration status will be required upon employment.

Have you ever been convicted of any felony or misdemeanor? ___ Yes ___ No
Convictions will not necessarily be a bar to employment.

If Yes, please explain _____
(attach additional pages, if needed)

Have you ever worked for East Irondequoit Central School District? ___ Yes ___ No

If Yes, when? _____
Describe position _____
(Attach additional pages, if needed)

Education					
	Name and Address of School	Course of Study/Major/Minor	No. of Years Completed	Diploma/Degree Received	Semester hours Credited
High School			1 2 3 4		
Undergraduate College			1 2 3 4		
Other (Specify)					

Work Experience				
Please list ALL of your work experience. The list must be complete and accurate. Start with your present or most recent employer. If you need additional space, please continue on a separate sheet of paper.				
1	Employer	From: _____ To: _____	Starting: _____ Final: _____	Position(s) Held
Street Address				Telephone Number
City		State	Zip Code	Supervisor's Name
Reason(s) for Leaving				May we contact this employer? ___ Yes ___ No
2	Employer	From: _____ To: _____	Starting: _____ Final: _____	Position(s) Held
Street Address				Telephone Number
City		State	Zip Code	Supervisor's Name
Reason(s) for Leaving				May we contact this employer? ___ Yes ___ No

WE ARE AN EQUAL OPPORTUNITY EMPLOYER

We consider applicants without regard to race, color, religion, creed, gender, national origin, age, disability, marital status, sexual orientation or veteran status, or any other legally protected status.

Work Experience (con't)

3	Employer	Dates Employed From: _____ To: _____	Hourly Rate/Salary Starting: _____ Final: _____	Position(s) Held
Street Address				Telephone Number
City	State	Zip Code		Supervisor's Name
Reason(s) for Leaving				May we contact this employer? <input type="checkbox"/> Yes <input type="checkbox"/> No

Military

Complete this section if you served in the U.S. Armed Forces.

Branch of Service	Active Duty (Month/Year) From To	Rank At Discharge	Date of Final Discharge
Describe duties and any special training			

References

Give names of those who have closely observed your work.

Name	Position	Phone Number	Current Address

Additional Information

Have you ever filed an application with the District before? ___ Yes ___ No

If yes, give application date _____/_____/_____

Are you a member of the New York State Employees' Retirement System? ___ Yes ___ No

If yes, please give number: _____

What Civil Service Tests have you taken? _____

Are you on a current eligible list? ___ Yes ___ No

Do you currently hold a Civil Service title? ___ Yes ___ No

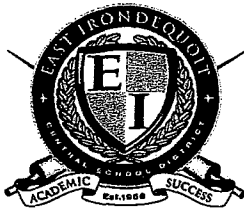
If yes, what title? _____

Applicant's Statement

I certify that answers given herein are true, accurate and complete to the best of my knowledge. I understand that, if employed, any false or misleading information given in my application or interview(s) may result in disqualification from consideration for employment or my discharge, if employed. I hereby authorize any individual, company, or institution with whom I have been associated to furnish the East Irondequoit Central School District with any information concerning my employment or background. I, also, hereby release any such individual, company or institution from any claims associated with providing information regarding my employment or background.

Signature of Applicant

Date



Transportation Staff Application Addendum

Transportation Department
 East Irondequoit Central School District
 125 Kane Drive, Rochester, New York 14622
 (585) 339-1200

Personal Information			
Last Name	First Name	Middle Name	
Street Address	City	State	Zip Code
Telephone Home:	Cell/Business	Application Date / /	

Please check what position are you applying? Bus Driver _____ Bus Monitor _____ Mechanic _____

When would you be able to begin employment? _____ / _____ / _____

Motorist Identification Number _____ Expiration Date _____

Class of Driver's License _____ State of Issuance _____

How many years have you driven? _____

During the past five years, have you had an accident which resulted in injuries to yourself or others? Yes No
 If Yes, please explain the extent of the accident/accidents (attach additional pages, if needed) _____

During the past five years have you been convicted of any moving violations (speeding, reckless driving etc.)? Yes No
 If yes, describe below

Date	Charge	Court and Location

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Signature of Applicant

Date

For Office Use Only

I have reviewed this application, the three character references and the report of the physician pertaining to the above named applicant for the position of bus driver, or bus monitor for the year _____ for the East Irondequoit Central School District

I hereby approve his/her employment

Date

Director of Transportation

Date

Chief School Officer