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# ANDOVER CENTRAL SCHOOL 31-35 Elm Street, P. O. Box G

-35 EIM Street, P. O. Box Andover, NY 14806 (607) 478-8491

# **ADMINISTRATIVE APPLICATION FORM**

## SUPPLY ALL INFORMATION EVEN IF CONTAINED ELSEWHERE

Date Name First Middle Last  Telephone: Email: Physical Address Mailing Address (If different from physical address) Are you a U.S. citizen or eligible to work in the U.S.? Yes No Have you ever been convicted of a crime? If yes, please explain  Position Applying For: Date Available to Begin:  CERTIFICATIONS  TITLE OF CERTIFICATE Certificate Valid in State Of ISSUED DATE EXPIRES			space provided, use tr	ne back page or insert sheets	s.)	
First Middle Last  Telephone: Email:  Physical Address  Mailing Address (If different from physical address)  Are you a U.S. citizen or eligible to work in the U.S.? Yes No  Have you ever been convicted of a crime? If yes, please explain  Position Applying For: Date Available to Begin:  CERTIFICATIONS  TITLE OF CERTIFICATE Certificate Valid in DATE DATE	Date					
First Middle Last  Telephone: Email:  Physical Address  Mailing Address (If different from physical address)  Are you a U.S. citizen or eligible to work in the U.S.? Yes No  Have you ever been convicted of a crime? If yes, please explain  Position Applying For: Date Available to Begin:  CERTIFICATIONS  TITLE OF CERTIFICATE Certificate Valid in DATE DATE	Name					
Physical Address	First	Middle	Last			
Mailing Address (If different from physical address) Are you a U.S. citizen or eligible to work in the U.S.? Yes No  Have you ever been convicted of a crime? If yes, please explain  Position Applying For: Date Available to Begin:  CERTIFICATIONS  TITLE OF CERTIFICATE Certificate Valid in DATE DATE	Telephone:		Email:			
Are you a U.S. citizen or eligible to work in the U.S.? Yes No  Have you ever been convicted of a crime? If yes, please explain  Position Applying For: Date Available to Begin:  CERTIFICATIONS  TITLE OF CERTIFICATE Certificate Valid in DATE DATE	Physical Address					
Have you ever been convicted of a crime? If yes, please explain  Position Applying For: Date Available to Begin:  CERTIFICATIONS  TITLE OF CERTIFICATE Certificate Valid in DATE DATE	Mailing Address (If different from ph	ysical address)				
Position Applying For: Date Available to Begin:  CERTIFICATIONS  TITLE OF CERTIFICATE Certificate Valid in DATE DATE	Are you a U.S. citizen or eligible to v	vork in the U.S.?	Yes ONo			
Position Applying For:  CERTIFICATIONS  TITLE OF CERTIFICATE  Certificate  Valid in  DATE  DATE	Have you ever been convicted of a	crime?	If ves. ple	ease explain		
CERTIFICATIONS  TITLE OF CERTIFICATE Certificate Valid in DATE DATE						
CERTIFICATIONS  TITLE OF CERTIFICATE Certificate Valid in DATE DATE	Position Applying For:			Date Available to Begir	n:	
				C		
	TITLE OF CERTIFICATE					
EDUCATIONAL HISTORY			ONAL HISTOR	Y		
Name of Location: Institution City/Town State Years Attended Major Hours Gradua			Years Attended	Major	Hours	Graduation
Under-graduate Under-graduate	Under-graduate					
Graduate Work	Graduate Work					
Post-Graduate/ Other						
What honors did you receive in college or later education?	What honors did you receive in colle	ge or later education?	)			
College minor Semester hours	College minor			Semester ho	ours	

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### **REFERENCES**

It is the applicant's responsibility to provide the school district with the following information in order to be considered for employment:

- A. The names of at least three reference sources must be provided and must include current employer, if employed, or last employer, if not currently employed.
- B. Applicants with work experience must provide recommendations from principals and/or superintendents from all contracted educational work experiences within the past three years. If experience was not within the past three years, provide references from last contracted experience.
- C. Applicants who are beginning teachers must include references from their student teaching supervisor(s) and cooperating teacher(s).

<u>Name</u>	Position/Relationship	<u>Address</u>	Phone Number
1.			
2.			
3.			

#### **EXPERIENCE**

Please list your experience chronologically, beginning with the most recent. Include both substitute and student teaching experiences if they have occurred in the last five years. This section MUST be completed in full – do not indicate "see resume."

Names and address for all organizations you have worked for must be listed. Please attached additional sheet, if needed.

Employer:	Dates of Employment:	to
	Phone Number:	
Position / Title:	Supervisor:	
Description of Duties:		
Reason for Leaving:		
	Dates of Employment:	
Address:	Phone Number:	
	Supervisor:	
Description of Duties:		
Reason for Leaving:		
Employer:	Dates of Employment:	to
Address:	Phone Number:	10
Position / Title:	Supervisor:	
Reason for Leaving:		
	Dates of Employment:	
	Phone Number:	
	Supervisor:	
Description of Duties:		
Reason for Leaving:		

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Have you ever failed to be reappointed? If so, please explain
To what professional organizations do you belong?
Have you had any significant assignments, such as professional leadership positions, building, system-wide or state committees?
What significant travels have you taken (when and where?)
<u>To the Applicant</u> : The remainder of this page is yours. Use it to amplify, explain, or continue any statements on previous pages. Use it to tell us anything on the form which you think is important for an employing school system to know about you as a prospective administrator. Please use your own handwriting.
Signature of Applicant (Must be original signature)  Date

**SEND YOUR APPLICATION TO:** 

Andover Central School, Attention Superintendent's Office, 31-35 Elm Street, P. O. Box G, Andover, NY 14806 Telephone: (607) 478-8491.

THE NEW YOUR STATE HUMAN RIGHTS LAW PROHIBITS DISCRIMINATION IN EMPLOYMENT BECAUSE OF AGE, RACE, CREED, COLOR, NATIONAL ORIGIN, SEX, DISABILITY, MARTIAL STATUS, OR CIMINAL 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, MARTIAL STATUS, OR CIMINAL RECORD IN CONNECTION WITH EMPLOYMENT BY ALLEGANY COUNTY MUNICIPALITIES.