Page 1 of 2 FORM A

## ANDOVER CENTRAL SCHOOL 31-35 Elm Street, P. O. Box G Andover, NY 14806

Andover, NY 14806 (607) 478-8491

## NON-INSTRUCTIONAL APPLICATION FOR EMPLOYMENT

## SUPPLY ALL INFORMATION EVEN IF CONTAINED ELSEWHERE

Please Pri	int (If answers to any qu	estions require more than the	space provided, use	the back page or insert she	eets.)	
Date						
Name:				Telephone: _		
Fire	st Middl	e Last		Email:		
Physical A	ddress					
Mailing Ad	dress (if different from	physical address)				
Are you a	United States Citizen?	If no, are	you eligible to	work in the United Sta	tes?	
-		any crime (felony or mis	•			
Were you	ever been dismissed o	r discharged from any E	mployment for re	easons other than lack	of work or fu	nds?
□ YES □	□ NO If yes, ex	cplain:				
Position D	esired:		Date a	vailable to begin empl	ovment	
			ONAL HISTOI	RY		
	Name of Institution	Location: City/Town State	Years Attended Full Time	Major	Semester Hours in Major	Graduation Diploma or Degree
High School						
College / University						

SEND YOUR APPLICATION TO:

Other

Andover Central School, Attention Superintendent's Office, 31-35 Elm Street, P.O. Box G, Andover, N.Y. 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.

List here in chronological order all significant work experience, including trade or business, military service, social work, work in summer camps or youth activities, etc.

Type of Work	From ( Mo. / Yr.)	To ( Mo. / Yr.)	Name, Address and Telephone # of Employer	Name & Address of Supervisor Who Knows About This Work
Type of Work	( IVIO. / 11.)	(100.711.)	releptione # of Employer	WHO KHOWS ADOUL THIS WOLK
			REFERENCES	
clude here only na	mes of people	who know of yo	ur quality of work. Include at leas	t two (2) professional references.
Name		Curr	ent Address and Telephone Number	Relationship to Candidate
o the Applicant <sup>.</sup> T	The remainder	of this page is v	ours. Use it to amplify explain or	continue any statements on
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To the Applicant: Trevious pages. Use prospective employ	e it to tell us an	of this page is y	ours. Use it to amplify, explain, or think is important for an employing	continue any statements on school system to know about you
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Date

Signature of Applicant (Must be original signature)