

GROTON CENTRAL SCHOOL

EMPLOYMENT APPLICATION - CLASSIFIED

(Clerical, Buildings & Grounds, Food Service, Teacher Aide, Transportation)

NAME: _____ DATE: _____

PRESENT ADDRESS: _____

UNTIL: _____ PHONE: (____) _____

PERMANENT ADDRESS: _____

PHONE: (____) _____ CELL PHONE: (____) _____

SOCIAL SECURITY #: _____
(must be completed)

EMAIL: _____

EMERGENCY CONTACT: _____ EMERGENCY PHONE: (____) _____

TITLE(S) OF POSITIONS FOR WHICH YOU ARE APPLYING

Substitute Regular Position *Please list specific name of position(s) you are applying for*

How did you hear about this position?

CERTIFICATION: Title(s) of your Education Certificates:

Certificate Title	State of Issue	Type of Certificate	Expiration Date

DATE AVAILABLE FOR EMPLOYMENT _____

No person shall be discriminated against in hiring practices or in the terms, conditions, and benefits of employment because of race, creed, color, religion, gender, national origin, age, physical handicap, political affiliation, marital status, or sexual orientation.

EDUCATION

Name and Address of School - Include High School, College, Graduate Work and Summer Sessions in order taken	Semester Hours	Type of Degree (B.A., B.S., M.A., Ph.D.)	Major Subject	Minor Subject
High School:				
College (Undergraduate):				
College (Graduate):				
Other:				

WORK EXPERIENCE (List ALL Work Experience)

DATES	FIRM OR INSTITUTION AND ADDRESS	NATURE OF WORK	% PERCENTAGE OF TIME WORKED

MILITARY SERVICE (Active Duty Only)

Branch of Service	Dates of Service

OTHER

HAVE YOU BEEN FINGERPRINTED FOR THE NYS EDUCATION DEPARTMENT? YES NO
(fingerprints for any other agency will not suffice)

HAVE YOU EVER BEEN CONVICTED OF ANY CRIME (FELONY OR MISDEMEANOR)? YES NO
If yes, explain.

HAVE YOU EVER BEEN TERMINATED FROM EMPLOYMENT? YES NO

DID YOU EVER RESIGN FROM ANY EMPLOYMENT RATHER THAN FACE DISMISSAL? YES NO

ARE YOU A UNITED STATES CITIZEN? YES NO

IF "NO", HAVE YOU FILED A DECLARATION OF INTENTION TO BECOME A U.S. CITIZEN? YES NO

LIST ANY PROFESSIONAL/COMMUNITY AFFILIATIONS OR HONORS RECEIVED:

REFERENCES

This is a request for references. Please provide at least 3 people. These references should be persons qualified to give information describing your abilities for the position you seek. Please include a supervisor(s) for whom you have worked. *Email address is preferred for us to contact your references.*

NAME AND PRESENT ADDRESS <i>(need complete address)</i>	POSITION/TITLE	EMAIL ADDRESS <i>(preferred)</i>	TELEPHONE NUMBER	DATES EMPLOYED OR KNOWN

My signature below indicates that I understand that officials of the Groton Central School District will be making an inquiry regarding my background and experience, and I hereby release from any liability anyone giving information regarding me, whether specified in my application or not, as long as the information given is relevant to the duties for which I have applied. I understand that information gathered, in part or whole may be shared with Supervisors and members of the Groton Central School District. I understand that all information gathered by you regarding my application will be the property of the Groton Central School District and will not be released to me unless required by federal or state statutes or regulations.

APPLICANT'S SIGNATURE

DATE

Send completed application to:
Lisa Warmbrodt
Groton Central School
P.O. Box 99
Groton, NY 13073

OFFICE USE ONLY

Interview Scheduled For:

Date

Time

Updated 9/2014