



**POSITION FOR WHICH YOU ARE APPLYING FOR**

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|---|---|
| <input type="checkbox"/> TEACHER (specify area): _____                            | <input type="checkbox"/> CLERICAL/OFFICE/ _____                                     |
| <input type="checkbox"/> TEACHER ASSISTANT  | <input type="checkbox"/> CLEANER / CUSTODIAN / MAINTENANCE                          |
| <input type="checkbox"/> SUBSTITUTE TEACHER: [ ] Certified [ ] Uncertified [ ] TA | <input type="checkbox"/> BUS DRIVER/BUS MONITOR                                     |
| <input type="checkbox"/> ADMINISTRATIVE: _____                                    | <input type="checkbox"/> SUBSTITUTE - Bus Driver/Bus Monitor<br>- Cleaner/Custodian |
| <input type="checkbox"/> OTHER: _____   |   |

**PERSONAL INFORMATION**

Full Name:	Last	First	Middle	Social Security #
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Home Phone #	Cell Phone #	Daytime Phone #
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Mailing Address:	Street	City	State	Zip Code
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Business Address:	Street	City	State	Zip Code
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Permanent Address:	Street	City	State	Zip Code
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E-Mail Address: \_\_\_\_\_

If hired, can you provide the documents required to prove that you are authorized to work in the U.S? (Circle)	Yes	No
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Do you have a driver's license? (Circle)	Yes	No
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If yes, what type of license? (Circle)	Operator's	Commercial
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Issuing State: _____	Class: _____
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Do you have any physical, medical, or mental conditions, which may limit you ability to perform the particular job for which you are applying? If yes, describe such condition and explain how you can adapt to perform the job for which you are applying: \_\_\_\_\_

Have you ever been charged with a crime? (Circle)	Yes	No
If yes, please give details: _____		

Have you ever been denied tenure?	Yes	No
Have you ever been asked to discontinue employment?	Yes	No

**EDUCATIONAL BACKGROUND**

Start with your highest level of education

High School University College  
Technical or Vocational Schools

Diploma / Degree / Certificate

Field or Major

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If you have earned Graduate School Credit, please tell us how many credit hours: \_\_\_\_\_

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**MILITARY**

Branch Of U.S. Service:

DATES: \_\_\_\_\_ to \_\_\_\_\_

Highest Rank: \_\_\_\_\_

Military Occupational Specialty:

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**CERTIFICATION INFORMATION:**

If position you are seeking requires certification, the following material must accompany this application:

- Placement file only upon request, Official University transcripts)
- Copy of valid teaching certificate/license
- Resume

Do you hold a valid N.Y. State Teaching Certificate/License? (Circle) Yes No

If yes, please indicate:

Area:	Permanent:	Provisional:	Provisional Expiration Date:
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List any valid certificates currently held in other states:

Area: \_\_\_\_\_ Issuing State: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

Did you ever acquire tenure in a New York State District? (Circle) Yes No

If yes, where? \_\_\_\_\_ When? \_\_\_\_\_ Tenure area: \_\_\_\_\_

Have you successfully completed the Core Battery NTEs/NYSTCE? (Circle) Yes No

Have you taken the two-hour seminar on of child abuse & neglect? (Circle) Yes No

List any extra curricular or coaching activities you feel confident to direct or coach successfully:

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**WORK EXPERIENCE (list the recent positions first)**  
**Please complete this section in full – do not indicate see resume.**

Employer: \_\_\_\_\_

Address: \_\_\_\_\_ Telephone: \_\_\_\_\_

Dates of Employment (month/year) From: \_\_\_\_\_ To: \_\_\_\_\_

Position/Title: \_\_\_\_\_ Salary: \_\_\_\_\_

Description of Duties: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

Employer: \_\_\_\_\_

Address: \_\_\_\_\_ Telephone: \_\_\_\_\_

Dates of Employment (month/year) From: \_\_\_\_\_ To: \_\_\_\_\_

Position/Title: \_\_\_\_\_ Salary: \_\_\_\_\_

Description of Duties: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

Employer: \_\_\_\_\_

Address: \_\_\_\_\_ Telephone: \_\_\_\_\_

Dates of Employment (month/year) From: \_\_\_\_\_ To: \_\_\_\_\_

Position/Title: \_\_\_\_\_ Salary: \_\_\_\_\_

Description of Duties: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

Employer: \_\_\_\_\_

Address: \_\_\_\_\_ Telephone: \_\_\_\_\_

Dates of Employment (month/year) From: \_\_\_\_\_ To: \_\_\_\_\_

Position/Title: \_\_\_\_\_ Salary: \_\_\_\_\_

Description of Duties: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

**REFERENCES (list three non-relatives willing to recommend you)**

Name                                      Address                                      City                                      State                                      Zip                                      Phone (Home/Business)

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**ADDITIONAL INFORMATION** If a member:      ERS# \_\_\_\_\_      TRS# \_\_\_\_\_

Salary Expected? \_\_\_\_\_      Date Available? \_\_\_\_\_

Why do you feel you should be hired for this position?

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I understand that Salamanca City Central School District will thoroughly investigate my work and personal history and verify all data given on this application, on related papers, and interviews. I authorize all individuals, schools, and firms named therein, except my current employer if so noted below, to provide any information requested about me, and I release them from all liability for damage in providing this information.

Can the Salamanca City Central School District contact your current employer? (Circle)      Yes      No

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Applicant's Signature

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Date

List any current Salamanca employee(s) to whom you are related to and designate the nature of the relationship (i.e. Parent {P}, Marriage {M}, In-Law {I}, Sibling {S}, Other {O}):

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The Salamanca City Central School District hereby advises Students, Parents, Employees, prospective employees and applicants that it offers employment, educational opportunities, including vocational education opportunities, without regard to sex, race, color, national origins, handicap or any other legally protected class. Inquiries regarding this non-discrimination policy may be directed to the Superintendent of Schools.

All applications should be emailed to:

Sarah Wiltse at [SWiltse@salamancany.org](mailto:SWiltse@salamancany.org)  
Human Resources  
Salamanca City Central School District  
50 Iroquois Drive  
Salamanca, New York 14779