

# SCIO CENTRAL SCHOOL

3968 WASHINGTON STREET • SCIO, NY 14880

585-593-5510 • FAX 585-593-0653

## EMPLOYMENT APPLICATION FORM

Please indicate the type of position you are seeking: (check all that apply.)

Full-time \_\_\_\_\_ Part-time \_\_\_\_\_ Substitute \_\_\_\_\_ Summer Help \_\_\_\_\_ Volunteer \_\_\_\_\_

TEACHER \_\_\_\_\_  
TEACHER AIDE/MONITOR \_\_\_\_\_  
ADMINISTRATOR \_\_\_\_\_  
CLERICAL \_\_\_\_\_  
NURSE \_\_\_\_\_  
BUS DRIVER \_\_\_\_\_  
MECHANIC \_\_\_\_\_

CUSTODIAL \_\_\_\_\_  
CLEANER \_\_\_\_\_  
FOOD SERVICE \_\_\_\_\_  
CAFETERIA AIDE/MONITOR \_\_\_\_\_  
CAFETERIA CASHIER \_\_\_\_\_  
OTHER: \_\_\_\_\_  
Certification Area (s): please indicate \_\_\_\_\_

### PERSONAL INFORMATION

Full Name: Last (↑) \_\_\_\_\_ First (↑) \_\_\_\_\_ Middle (↑) \_\_\_\_\_ Social Security # (↑) \_\_\_\_\_

Home Phone # (↑) \_\_\_\_\_ Daytime Phone # (↑) \_\_\_\_\_

Home Address: (↑) \_\_\_\_\_ Street (↑) \_\_\_\_\_ City (↑) \_\_\_\_\_ State (↑) \_\_\_\_\_ Zip Code (↑) \_\_\_\_\_

Business Address: (↑) \_\_\_\_\_ Street (↑) \_\_\_\_\_ City (↑) \_\_\_\_\_ State (↑) \_\_\_\_\_ Zip Code (↑) \_\_\_\_\_

Permanent Address: (↑) \_\_\_\_\_ Street (↑) \_\_\_\_\_ City (↑) \_\_\_\_\_ State (↑) \_\_\_\_\_ Zip Code (↑) \_\_\_\_\_

E-Mail Address \_\_\_\_\_

Do you have a current driver's license? (Circle) Yes No  
If yes, what type of license? (Circle) Operator's Commercial

Issuing State: \_\_\_\_\_ Class: \_\_\_\_\_

Have you ever been convicted of a felony? (Circle) Yes No  
If yes, please give details: \_\_\_\_\_

**OFFICE USE ONLY:** Date Interviewed \_\_\_\_\_ 20\_\_\_\_ Position: \_\_\_\_\_  
Interview by: \_\_\_\_\_ References Checked: \_\_\_\_\_  
Recommendation: \_\_\_\_\_ Board Approved: \_\_\_\_\_ Fingerprinting Completed: \_\_\_\_\_  
Emergency Conditional Clearance: \_\_\_\_\_

**CERTIFICATION INFORMATION:**

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

- *Placement file/transcripts*
- *Copy of valid teaching certificate/license*
- *Resume*

**Have you been fingerprinted through the New York State Education Department?** Yes \_\_\_\_\_ No \_\_\_\_\_  
If yes where? \_\_\_\_\_

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

If yes, please indicate:

Area	Permanent	Provisional	Prov. Expiration Date
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

List any valid certificates currently held in other states:

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

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

If yes, where? \_\_\_\_\_ When? \_\_\_\_\_  
Tenure areas? \_\_\_\_\_

Have you successfully completed the NYSTCE? (Circle) Yes No

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

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**EDUCATIONAL BACKGROUND:**

High School/University/College:	Degree or Diploma	Field or Major:
_____		
_____		
_____		
_____		

# Of Graduate School Credits: \_\_\_\_\_

**WORK EXPERIENCE (List most recent positions first)**

This section must be completed in full – DO NOT INDICATE “SEE RESUME.”

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

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

Dates of Employment (month/year) FROM: \_\_\_\_\_ TO: \_\_\_\_\_ Supervisor: \_\_\_\_\_

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

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

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

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

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

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

**REFERENCES:**

(List four non-relatives willing to recommend you and be qualified to give any information to show your fitness for the position you seek.) Do not refer to Resume.

Name Address Daytime Phone (home/business) Occupation

Four horizontal lines for entering reference information.

**ADDITIONAL INFORMATION:**

Salary Expected? \$ \_\_\_\_\_ Date Available? \_\_\_\_\_ 20\_\_\_\_\_

If a Member: ERS# \_\_\_\_\_ TRS# \_\_\_\_\_

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

Five horizontal lines for providing reasons for being hired.

How did you learn of this opening? Newspaper (Classifieds) \_\_\_\_\_ Vacancy Notice \_\_\_\_\_

Teacher Recruitment \_\_\_\_\_ College Placement Office \_\_\_\_\_ Scio Employee \_\_\_\_\_

Other (describe) \_\_\_\_\_

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

May Scio Central School contact your current employer? (Circle) Yes No

Applicant's Signature \_\_\_\_\_ Date \_\_\_\_\_

**Scio Central School will consider applicants for all positions without regard to race, color, religion, sex, national origin, age, marital or veteran status, medical condition or disability, or any other legally protected status.**