

# District Office 14665 State Route 22 New Lebanon, NY 12125 518-794-7600 518-766-5574 (fax)

New York State Law prohibits discrimination on the grounds of race, color, creed, sex, national origin, age, disability, or marital status. New Lebanon Central School District is an equal opportunity employer.

Date:	Position Applied For:		
Name:			
Street Address:			
City:		State:	Zip Code:
Home Phone Number:		Work Ph	hone Number:
Cell Phone Number:	En	nail Address:	
Are you a United States cit	tizen? Yes	No	_
If no, do you have a legal i	right to work in the U.S.?	Yes	No
How did you learn of this	opening?		
Have you worked for the I	District before?	If yes,	when?
List any friends or relative	es working for us		
If hired, on what date will	you be available to start v	work?	
	t check to determine suitability		nd national criminal history background investigation, nt. Failure to meet the standards for the background
Have you ever been convid	cted of a crime (felony or	misdemeanor	or), not including any violation or infraction?
Yes No			
If yes, describe in full			

# **<u>EMPLOYMENT HISTORY</u>**: (you may attach a current resume to this application)

Dates	Name, Address & Telephone Number of Employer	Supervisor's Name & Title	Reason for Leaving
From:			
То:			

Dates	Name, Address & Telephone Number of Employer	Supervisor's Name & Title	Reason for Leaving
From:			
To:			

Dates	Name, Address & Telephone Number of Employer	Supervisor's Name & Title	Reason for Leaving
From:			
То:			

May we contact the employers listed above? Yes <u>No</u> If not, indicate below which one(s) you do not wish us to contact.

# **EDUCATIONAL AND PROFESSIONAL TRAINING:**

Beginning with high school, list all schools or institutions (name & address)	No. of years attended	Course or Major	Graduated (yes or no)	Diploma or Degree

The space below is for more detailed information about yourself. Include special qualifications and/or training, unusual teaching experiences, participation in activities in and out of school, etc., that will give a more complete estimate or your training, experience, character and ability.

## For Teaching, Teaching Assistants, and Administrative Positions Only:

#### **CERTIFICATION:**

Do you have a New York State Certificate	? Yes:	No:	In Process:		
Probationary: Permanent:	Professional: _				
Date received:	TEACH ID# (n	ot certificate #):			
List all current certificates:					
Have you ever been tenured in another school district? Yes No					

#### **<u>REFERENCES</u>**:

Relationship:	Address	Telephone No.	Years Known
	Relationship:	Relationship: Address   Image: Address in the second seco	Relationship: Address Telephone No.   Image: Constraint of the second

I hereby authorize investigation of all statements contained in this application. I certify that such statements are true and understand that misrepresentation or omission of facts called for in this form is cause for termination of employment without notice. I hereby also agree to hold the New Lebanon Central School District harmless in divulging the information contained in this application form as well as any personnel records developed as a result of employment with the New Lebanon Central School District.

I also agree to such examination by a New Lebanon Central School District designated physician as may be required and agree, if employed, to abide by all regulations of the New Lebanon Central School District.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

## **REFERENCE CHECK** (office use only)

Name/Title	Relationship	Phone No.	Comments