

Office Use Only

If you answered “yes” to question 2, or question 3 above, please give detailed explanation:

Were you ever dismissed from a school district conferring tenure pursuant to Education Law, section 3020-a? Yes ☐ No ☐

EDUCATIONAL PREPARATION

Name and location of colleges for graduate and undergraduate studies:

_____				Did You Graduate? Yes ☐ No ☐

_____	Sem.Hr	Major/Minor	Gr.Pt.Avg.	Degree

_____				Did You Graduate? Yes ☐ No ☐

_____	Sem.Hr	Major/Minor	Gr.Pt.Avg.	Degree

List workshops and assessments completed towards licensing:

_____	_____
_____	_____
_____	_____

Name and location of school where you performed your student teaching:

_____	Subject or Grade Level	Cooperating Teacher

_____	Subject or Grade Level	Cooperating Teacher

EMPLOYMENT HISTORY AND WORK EXPERIENCE

(List most recent experience first/list all prior employers/use additional sheet if necessary.)

Name of Employer _____	Supervisor's Name _____
Address _____	Supervisor's Title _____
City _____ State _____ Zip _____	Years of Service ____/____/____ to ____/____/____
Phone () _____	Number of hours worked per week _____
email: _____	May we contact this employer? Yes ☐ No ☐
Position Held _____	
Describe in detail your responsibilities and work performed: _____	

Reason for leaving: _____

Name of Employer _____	Supervisor's Name _____
Address _____	Supervisor's Title _____
City _____ State _____ Zip _____	Years of Service ____/____/____ to ____/____/____
Phone () _____	Number of hours worked per week _____
email: _____	May we contact this employer? Yes ☐ No ☐
Position Held _____	
Describe in detail your responsibilities and work performed: _____	

Reason for leaving: _____

Name of Employer _____ **Supervisor's Name** _____
Address _____ **Supervisor's Title** _____
City _____ **State** _____ **Zip** _____ **Years of Service** ____/____/____ to ____/____/____
Phone () _____ **Number of hours worked per week** _____
email: _____ **May we contact this employer?** Yes ☐ No ☐
Position Held _____
Describe in detail the work you performed: _____

Reason for leaving: _____

Other references familiar with your work

Name _____ Address _____ City _____ State _____ Zip _____ Relationship _____ Phone () _____ email: _____	Name _____ Address _____ City _____ State _____ Zip _____ Relationship _____ Phone () _____ email: _____
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Name _____
 Address _____
 City _____ State _____ Zip _____
 Relationship _____
 Phone () _____
 email: _____

Additional Information

Describe any additional information or comments that would be useful in the course of your employment (e.g. sports played or coached; interest in coaching or extracurricular advisorship; foreign languages spoken; travel experience; volunteer experience): _____

CONDITIONS OF EMPLOYMENT

New York State Retirement System

As a part-time employee, you have the option to join the New York State Retirement System. If you decide to join, there is a mandatory contribution for retirement deducted from the gross amount of your check.

- ☐ I am already a member.
- ☐ I do not wish to join the New York State Retirement System.
- ☐ Please send me all forms necessary to join the New York State Retirement System.

I hereby certify that the facts set forth in the above employment form are true and complete to the best of my knowledge. I authorize you to make any investigation of my employment record. I waive my right of access to any information provided by any references in the process of investigating my work record. I understand that false or misleading statements will be considered justification for disqualification of my application or termination of employment.

Employee's Signature: _____ **Date:** _____

The Pine Bush Central School District is an equal opportunity employer. The District does not discriminate in its education programs/activities or in employment on the basis of, and applicants are considered for all positions without regard to, race, color, religion, sex, sexual orientation, national origin, age, marital or veteran status, the presence of a non-job related medical condition of handicap, or other legally protected status. Any concerns regarding discrimination should be directed to the District Title IX Compliance Officer or to the US Department of Education, Office of Civil Rights.