

**WATERVLiet CITY SCHOOL DISTRICT  
1245 HILLSIDE AVENUE  
WATERVLiet, NEW YORK 12189**

**Application for Employment (Instructional)**

Instructions: This application must be completed in full, even if you include a resume. Conditions of employment are stated at the end of this form. Please read carefully before you sign the application.

<b>Positions for Which You Are Applying</b> (Check all that are applicable)			
Elementary School	<input type="checkbox"/>	Teacher	<input type="checkbox"/>
Junior-Senior High School	<input type="checkbox"/>	Teaching Assistant	<input type="checkbox"/>
Special Education	<input type="checkbox"/>	Tutor	<input type="checkbox"/>
		Substitute	<input type="checkbox"/>

***Watervliet City School District will consider applicants for employment without regard to age, race, creed, color, national origin, sex, sexual orientation, disability, military status, genetic predisposition or carrier status, or marital status, or any other legally protected status.***

<b>Personal Information</b>			
First Name	Last Name	Middle Initial	Social Security Number (Voluntary)
Present Address			Home Telephone Number
City		State	Zip Code

Are you legally eligible to be employed in the United States?  
*(Proof of identity and eligibility will be required upon employment)*  YES  NO

Are you over the age of 18 years?  
*(If No, you will be asked to provide authorization to work)*  YES  NO

Have you been convicted of a felony or misdemeanor?  
*(If yes, please provide an explanation of the circumstances surrounding the conviction. A conviction will not necessarily result in denial of employment)*  YES  NO

\_\_\_\_\_

\_\_\_\_\_

Have you ever worked for the Watervliet City School District before?  YES  NO

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

***For District Use Only***

<i>Selected for Interview</i>	<i>Interview Date</i>	<i>Interviewer</i>
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**Teaching Experience**

Years of Teaching Experience:  0-6       7-8       9-12      Other: \_\_\_\_\_

Tenured:  YES    NO      Date: \_\_\_\_\_      School District: \_\_\_\_\_

Degree(s) Earned:  BA       BS       MA       MS       PhD

Certification:       NY       MA       CT       PA      Other \_\_\_\_\_

Certification Number: \_\_\_\_\_      Type: \_\_\_\_\_

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Certification Number: \_\_\_\_\_      Type: \_\_\_\_\_

Are you presently under contract?       Yes       No      Until \_\_\_\_\_

If Retired, From What District: \_\_\_\_\_ Year \_\_\_\_\_

**Education**

Do you have a High School diploma or GED?       Yes       No

	Name and location of School	No of Years Completed	Major/Minor	Diploma or Degree
2- Year College				
4-Year College				
Graduate School Total Number of Graduate Hours _____				

List any membership in any Professional or Civic Organizations. Please indicate any prior military service that you would like considered in connection with your application for employment:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Employment History**

Start with your present or most recent position (attach additional sheet if necessary).

Name of Employer	Telephone Number
Address	Supervisors Name and Title
City                                  State                                  Zip Code	Dates of employment From                                  To
Position Held	Salary or rate of pay
Reason for leaving	May we contact this employer? <input type="checkbox"/> YES <input type="checkbox"/> NO

Name of Employer	Telephone Number
Address	Supervisors Name and Title
City State Zip Code	Dates of employment From To
Position Held	Salary or rate of pay
Reason for leaving	May we contact this employer? <input type="checkbox"/> YES <input type="checkbox"/> NO

Name of Employer	Telephone Number
Address	Supervisors Name and Title
City State Zip Code	Dates of employment From To
Position Held	Salary or rate of pay
Reason for leaving	May we contact this employer? <input type="checkbox"/> YES <input type="checkbox"/> NO

**Professional References**

Please list three references *(Please ensure addresses are complete and accurate)*

Name	Occupation/Title
Address	Telephone Number
City State Zip Code	Relationship

Name	Occupation/Title
Address	Telephone Number
City State Zip Code	Relationship

Name	Occupation/Title
Address	Telephone Number
City State Zip Code	Relationship

**Personal References**

Please list three references (Please ensure addresses are complete and accurate)

Name			Occupation/Title
Address			Telephone Number
City	State	Zip Code	Relationship

Name			Occupation/Title
Address			Telephone Number
City	State	Zip Code	Relationship

Name			Occupation/Title
Address			Telephone Number
City	State	Zip Code	Relationship

Why are you interested in a position with the Watervliet City School District?

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I certify that all answers given by me are true, accurate and complete. I understand that the falsification, misrepresentation or omission of fact on this application (or any other accompanying or required documents) will be cause for denial of employment or immediate termination of employment, regardless of when or how discovered. I authorize the investigation of all statements and information contained in this application. I release from all liability anyone supplying such information and I also release the employer from all liability that might result from making an investigation. If hired, I agree to abide by all the district's rules and regulations. I further understand that no representation, whether oral or written by any representative or agent of the district, at any time, can constitute a contract of employment.

I acknowledge that I have read and understand the above statements and hereby grant permission to confirm the information supplied on this application by me:

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