

GLOVERSVILLE

Enlarged School District

Gloversville NY 12078

Application for Employment

For which position(s) do you wish to be considered? _____

1. Please complete this application and forward along with your resume to:
Superintendent of Schools, Gloversville Enlarged School District,
PO BOX 593, Gloversville, New York 12078.
2. In order to be considered for this position, the following materials must be submitted to the address listed above:
 - Official College Transcripts
 - Copies of Teaching Certificates
 - Official Placement Folder
3. You are invited to submit any other information in support of your candidacy.

I BACKGROUND INFORMATION

_____	_____	_____
Last Name	First Name	Middle
Home Address: _____		_____
_____		Telephone: _____

Business Address: _____		_____
_____		Telephone: _____

II PROFESSIONAL PREPARATION

	<u>INSTITUTION & LOCATION</u>	<u>MAJOR/MINOR</u>	<u>DEGREE</u>	<u>GRADUATION DATE</u>
Undergraduate:	_____			

Graduate:	_____			

III CERTIFICATIONS – TEACHING AND ADMINISTRATIVE

List all teaching and administrative certificates which you have earned in education:

TITLE OF CERTIFICATION DATE ISSUED EXPIRATION DATE VALID IN STATE OF

IV EMPLOYMENT HISTORY

List all experience with the most recent first. Include school, non-school and military service.

INSTITUTION AND LOCATION TITLE OF POSITION YEARS FROM/TO SIZE/UNIT

V MORAL CHARACTER DETERMINATION

If you answer “yes” to any question, please attach a full explanation for your answer.

- Have you ever been denied tenure, dismissed, resigned from, entered into a settlement agreement, or otherwise left employment to avoid investigation and/or dismissal for alleged misconduct? Yes No
- Did you ever receive a discharge from the Armed Forces of the United States which was other than “Honorable”? Yes No
- Have you ever been convicted of any crime (felony or misdemeanor) other than minor traffic violations? Yes No
(If yes, submit a copy of the court record(s) including disposition of the case.)
- Have you ever had an application denied for a teaching credential issued in New York or any other jurisdiction ? Yes No
- Have you ever had a teaching credential issued in New York or any other jurisdiction revoked, suspended, annulled or otherwise invalidated? Yes No
- Have disciplinary proceedings ever been initiated against you pursuant to New York State Education Law, Section 3020-a or the disciplinary provisions of any other jurisdiction? Yes No
- Have you ever been the subject of a report filed with the New York State Education Department pursuant to Part 83 of the Commissioner’s Regulations (Determination of Good Moral Character)? Yes No

VI ADDITIONAL INFORMATION

Would you be willing to supervise an extra-curricular activity within the District?
If so, which type of activity would you like to be considered for by the District?

When would you be available to start work? _____

VII PLEASE WRITE A BRIEF ESSAY ON THE FOLLOWING TOPICS:

■ Why are you interested in working for the Gloversville Enlarged School District?

■ Describe your plan for helping your students achieve the New York State standards.

VIII REFERENCES

List the names of four persons who, during the past five years, are knowledgeable as to your educational or other experiences (at least two of these individuals must be direct supervisors):

Name _____ Title _____

Address _____ Telephone _____

Name _____ Title _____

Address _____ Telephone _____

Name _____ Title _____

Address _____ Telephone _____

Name _____ Title _____

Address _____ Telephone _____

Name _____ Title _____

Address _____ Telephone _____

IX APPLICANT'S SIGNATURE

I declare and affirm, under the penalty of perjury, that all the statements made in the foregoing application, including accompanying statements, are true, complete and correct. I further declare and affirm that any arrest and/or conviction that occurs subsequent to the date of this application, but prior to issuance of any certificate, will be reported in writing to the Office of Teaching, Teacher Discipline Unit, Education Building – 5 North, Albany, NY 12234. I understand that my failure to report such information may result in the invalidation of my certificate.

By signing this form, I consent to the release of information to the New York State Education Department for the purpose of ascertaining my moral character pursuant to 8 NYCRR 83 of the Commissioner's Regulations.

Signature _____ Date _____

THE GLOVERSVILLE ENLARGED SCHOOL DISTRICT IS
AN EQUAL OPPORTUNITY/AFFIRMATIVE ACTION EMPLOYER.

For Office Use Only

X APPOINTMENT INFORMATION:

Years credited _____ Recommended on Step _____ Graduate Hours Credited _____

Master's _____ Differential (if applicable) _____ = Salary _____