ENLARGED CITY SCHOOL DISTRICT OF TROY, NEW YORK
475 First Street, Troy NY 12180 • (518) 328-5041 • www.troy.k12.ny.us
An Equal Opportunity / Afffirmative Action Employer

DATE _____

NON-INSTRUCTIONAL EMPLOYMENT APPLICATION

How did you find out about this position?
Posting (Where?) _____
Website (Where?) _____
Word of Mouth ____ Newspaper ____
Other _____

PERSONAL INFORMATION

Name _____ SS No. _____ Retirement No. _____

Permanent Address _____ Tel. No. _____

Mailing Address (if different) _____ Tel. No. _____

E-Mail Address _____ Cell No. _____

POSITION PREFERENCE

Effective July 1, 2001, Chapter 180 of the Laws of 2000 requires the Commissioner of Education and the New York State Education Department (NYSED) to request a **fingerprint supported criminal history background check** for prospective employees of school districts.

_____ Teacher Aide
_____ School Monitor
_____ School Nurse
_____ Clerk / Typist
_____ Other _____

_____ Substitute Educational Support Personnel (teacher aide / school monitor)
_____ Substitute School Nurse
_____ Substitute Clerk / Typist
_____ Substitute Maintenance Helper

_____ **INITIAL**

When are you available for employment? _____

A Civil Service Exam may be required for the position you are applying for.

_____ **INITIAL**

CERTIFICATIONS

Do you presently hold a valid certificate, license or authorization to practice a profession or trade? **YES** _____ **NO** _____

NAME OF PROFESSION / TRADE	Date Issued / Date Expires	Licensing Agency

Are you a U.S. citizen? YES _____ NO _____
If not, have you filed a Declaration of Intent? YES _____ NO _____
Are you serving in the U.S. Armed Forces? YES _____ NO _____
*Did you receive a dishonorable discharge from the U.S. Armed Forces? YES _____ NO _____
*Have you ever been convicted of or pled guilty to a felony or misdemeanor crime? YES _____ NO _____
*Are there any criminal charges pending against you? YES _____ NO _____
*Have you ever resigned from a position rather than face disciplinary action? YES _____ NO _____
*Has any disciplinary action been brought against you at any time during your current or past employment? YES _____ NO _____

** If yes, please explain in a confidential letter and attach.*

EDUCATION & PROFESSIONAL TRAINING

(List in chronological order, beginning with High School.)

SCHOOL/LOCATION	DATES ATTENDED FROM	TO	GRADUATE Y / N	COURSE / DEGREE
ELEMENTARY				
HIGH SCHOOL				
COLLEGE				
PROFESSIONAL / TECHNICAL SCHOOL				
OTHER SCHOOLS / SPECIAL COURSES				

What office business machines or production machinery can you operate?

_____

_____

Do you speak a language other than English? **YES** _____ **NO** _____

List language(s) and degree of fluency.

_____

_____

Describe any scholastic honors or service awards you have received.

_____

_____

MILITARY SERVICE

BRANCH OF SERVICE	DATES OF SERVICE FROM	TO

EMPLOYMENT EXPERIENCE

(List in chronological order, beginning with the most recent.)

	NAME / ADDRESS OF COMPANY	KIND OF WORK	DATES OF EMPLOYMENT FROM TO	REASON FOR LEAVING	SUPERVISOR / TITLE PHONE NUMBER(S) (Reference purposes)
1.					
2.					
3.					
4.					
5.					

If presently employed, why are you seeking to leave your current position? _____

REFERENCES

(List below four (4) references of people who we can contact for character references.)

NAME	TITLE	ORGANIZATION	PHONE #
1.			
2.			
3.			
4.			

I certify that, the information contained in this application is true and correct to the best of my knowledge. I understand that false or incorrect information in this application is grounds for disqualification from further consideration or for subsequent dismissal from employment, if I am hired. I hereby consent to have the Enlarged City School District of Troy contact anyone it deems appropriate to investigate or verify any information I have given or to discuss my background, past performance or suitability for employment. I hereby authorize my former employer(s), reference(s) and any other individual or organization to provide information solicited by the District. I hereby release and discharge each of the above, including the District, from any liability of any kind or nature and waive all rights to bring any action for defamation, invasion of privacy or any similar course of action against anyone contacted as a result of what he or she may say about me.

_____ _____

SIGNATURE OF APPLICANT **PRINT NAME OF APPLICANT**

RETURN TO:

The Enlarged City School District of Troy
Office of Human Resources
475 First Street, Troy NY 12180
TELEPHONE NO. (518) 328-5041
FAX NO. (518) 271-5194

ENLARGED CITY SCHOOL DISTRICT OF TROY

TODAY'S STUDENTS. TOMORROW'S LEADERS.

An Equal Opportunity / Affirmative Action Employer

VOLUNTARY AFFIRMATIVE ACTION INFORMAITON

DATE: _____

NAME: _____
Last First Middle

ADDRESS: _____

TELEPHONE #: _____ Cell #: _____

The Board of Education is committed to ensuring human rights in the school district. The Board, its officers and employees, will not discriminate against any student, employee or applicant for employment on the basis of race, color, sex, national origin, creed or religion, marital status, disability or age. The school district will establish and maintain an atmosphere in which all children can develop attitudes and skills for effective, cooperative living. This policy of non-discrimination includes: access by students to educational programs, counseling services for students, course offerings and student activities, recruitment and appointment of employees, and employment pay and benefits.

This form will be used to support Policy 0100 and to maintain applicant flow data by race and gender.

In an effort to comply with requirements regarding District record keeping, reporting and other legal obligations, we ask that you complete this application data survey. Your cooperation is appreciated. Please be advised that your survey is NOT a part of your official application for employment. It is considered confidential information and will not be used in any hiring decision

PLEASE CHECK APPROPRIATE CATEGORIES:

1) _____ U.S. Citizen _____ Resident Alien

2) _____ Male _____ Female

3) Hispanic / Latino (please circle): Yes or No

4) _____ Asian _____American Indian or Alaskan Native
_____Black or African American _____Native Hawaiian or Other Pacific Islander
_____White

EDUCATION LEVEL:

_____ HS Diploma/ GED
_____ Freshman year completed
_____ Sophomore year completed
_____Associate Degree completed
_____Junior year completed
_____ Bachelor's Degree completed
_____ BS +30 or more credits
_____ Master's Degree completed
_____ MS + 30 or more credits
_____ Doctorate completed

TOTAL YEARS OF PRIOR TEACHING EXPERIENCE (if applicable): _____

While the provision of this information is voluntary on your part, our statutory responsibilities require the collection of reliable information and we, therefore, encourage you to participate.