

An Equal Opportunity / Affirmative Action Employer

INSTRUCTIONAL EMPLOYMENT APPLICATION Today's					s Date:			
How did you find out about this position?								
Posting (Where?) Website (Where?)								
Word of Mou	Word of Mouth Newspaper Other:							
	PE	RSONAL IN	FORMATION					
Full Name:								
Permanent Ac	ddress:							
Mailing Addre	ess (if different)							
Posting # (for	position you are applying for):	E-N	Лаil Address:					
Home Phone N			Cell No.					
		POSITION P	REFERENCE					
Teaching – Elementary Teaching – Long Term Substitut				erm Substitute				
Teaching – Seco			Teaching Assistant					
	diem Substitute		Administrative					
Subject:			When are you available for employment?					
CERTIFICATIONS								
Do you presently hold a valid New York State certification for the position for which you are applying? Yes No								
					<u> </u>			
TYPE Initial	Subject Area Date Issued Date Expires			Cen	Certification Number			
Professional								
Provisional								
Permanent								
Are you a U.S. Citizen? Yes No No \								
Are you a U.S. Citizen?						No 🗌		
If not, have you filed a Declaration of Intent?						No 🗌	N/A 🗌	
Are you able to fulfill the citizenship requirements for a teaching position in the District?						No 🗌		
Are you serving in the U.S. Armed Forces?						No 🗌		
Did you receive a dishonorable discharge from the U.S. Armed Forces?*						No 🗌	N/A 🗌	
						No 🗌		
Are there any criminal charges pending against you?* Yes No No								
Have you ever resigned from a position rather than face disciplinary action?* Yes No No						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 Name/Location			Gradua	ate	te Degree		GPA	Major
		Y	Yes No No					
		Υ	es 🗌 N	lo 🗌				
		Υ	es 🔲 N	lo 🗌				
			es 🔲 N	lo 🗌				
Do you speak a language other than	n English?	Υ	Yes No No					
List language(s) and degree of fluency:								
Describe any scholastic honors or service awards you have received:								
STU	DENT TEAC	CHII	NG / AD	MINIS	STR	ATIVE IN	TERNSHI	
(Li	st in chronolo	ogica	al order, l	oeginnii	ng w	ith the mo	st recent)	.
	Inclusive Dates		ates				Immediate Supervisor	
District/School	From		Grade / Subje		e / Subjec	t Area	(Please include phone number or e-mail, for reference purposes)	
TEACHING / ADMINISTRATIVE EXPERIENCE								
(List in chronological order, beginning with the most recent)								
			Dates of Employment		Supervisor / Title			
District/School	Type of Work		From To		To Reason for Leaving		or Leaving	(Please include phone number or e-mail address for reference purposes)
If presently employed, why are you seeking to leave your current position?								

Have proceedings ever been initiated against you pursuant to NYS Education Law §3020a?* YES ☐ NO ☐						NO 🗌		
*If yes, please explain in a confidential letter and at	tach.							
Have you previously filed an application with the District?							NO 🗌	
Have you previously been employed with the District? If yes, when and in what capacity? (Please explain below)						NO 🗌		
Have you ever been denied tenure?							NO 🗌	
Have you ever been granted tenure in any	NYS public	school or I	BOCES?			YES	NO 🗌	
If so, in which school district?								
	NON	I-TEACH	ING EXP	ERIENCE				
(List in chronological	order partio	cularly as it	relates to tl	he positon for which you	are applying)			
	Inclusive Dates Supe				rvisor/Title			
	Please inc				lude phone # and			
Employer	From	То	Т	Type of Work		E-mail for reference purposes		
R	ELATED	PROFES	SSIONAL	EXPERIENCE				
Please list any experience(s) you l	nave with c	ulturally or	ethnically d			nstitutions	5;	
		<u> </u>		<u>`</u>				
List any academic, extracu	rrigular acti	ivitios athle	atic activitio	s or slubs you are able t	a direct/coach	201/		
				obbies, talents and inter		ally		
		REF	ERENCES					
List below five (5) references of people who	have first-ha	and knowled	ge of your ch	aracter, personality, schola	rship, teaching o	r leadershi	p ability.	
Name		Title		Organization	Pł	none #/E	-mail	
Please I	Note: Two	(2) referent	ces must be	immediate supervisors.				

The District seeks candidates for teaching positions who can express themselves in a clear, cogent and grammatically correct manner. We believe such competency is essential regardless of grade level or subject area. Please submit a statement expressing why you are seeking employment with the Enlarged City School District of Troy and indicate specific contributions you can make as a teacher in our school community. (NO typed samples, please write in your own handwriting; attach additional sheets if desired.)

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 the 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

NOTE: This application will be maintained in our active file only during the school year in which it is filed.

The following documents must be received in order for your application to be processed:

Copy of NYS Certification
Credential File / Letters of Recommendation
Official Transcripts
Recent Resume
Tenure Letter (if applicable)

Please return to:

The Troy City School District Office of Human Resources 475 First Street Troy, NY 12180

Telephone No: (518) 328-5041 Fax No: (518) 271-5194



An Equal Opportunity / Affirmative Action Employer VOLUNTARY AFFIRMATIVE ACTION INFORMATION

DATE:	
NAME:(Last) (First)	(Middle)
, ,	(Middle)
ADDRESS:	
TELEPHONE #:	CELL #:
discriminate against any student, employee or applicant for emplo marital status, disability or age. The school district will establish ar and skills for effective, cooperative living. This policy of non-d	In the school district. The Board, its officers and employees, will not syment on the basis of race, color, se, national origin, creed or religion, and maintain an atmosphere in which all children can develop attitudes iscrimination includes access by students to educational programs, evities, recruitment and appointment of employees, and employment
This form will be used to support Policy 0100 and to maintain appl	icant flow data by race and gender.
	ord keeping, reporting and other legal obligations, we ask that you ated. Please be advised that your survey is NOT a part of your official ion and will not be used in any hiring decision.
PLEASE CHECK APPR	OPRIATE CATEGORIES:
1. U.S. Citizen Resident Alien	4. Asian
	Black or African American
2. Male Female	☐ White
	American Indian or Alaskan Native
3. Hispanic/Latino Yes No (Please check one)	☐ Native Hawaiian or Other Pacific Islander
EDUCAT	ION LEVEL:
HS Diploma/ GED	☐ Bachelor's Degree completed
Freshman year completed	BS +30 or more credits
Sophomore year completed	Master's Degree completed
Associate Degree completed	MS +30 or more credits
☐ Junior year completed	☐ 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.