

**MOHONASEN CENTRAL SCHOOL DISTRICT**  
 2072 Curry Road, Schenectady, N.Y. 12303 • Area Code (518) 356-8200

**PROFESSIONAL APPLICATION  
 POSITION PREFERENCE**

<b>ELEMENTARY</b> N - 6  Grade Level Preference _____ Special Area _____ Regular <input type="checkbox"/> Substitute <input type="checkbox"/>	<b>SPECIAL AREA:</b> (For example: Art, Guidance, Library, Music, Phys. Ed., Special Ed.)  Grade Level Preference _____ Special Area _____ Regular <input type="checkbox"/> Substitute <input type="checkbox"/>	<b>SECONDARY</b> 7 - 12  Grade Level Preference _____ Special Area _____ Regular <input type="checkbox"/> Substitute <input type="checkbox"/>
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**PERSONAL INFORMATION**

Name \_\_\_\_\_ Soc. Sec. No. \_\_\_\_\_  
Last                      First                      Middle

Present Address \_\_\_\_\_ Telephone \_\_\_\_\_  
(include Zip Code)

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Permanent Address \_\_\_\_\_ Telephone \_\_\_\_\_  
(include Zip Code)

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Are you legally available for employment in this country?      Yes \_\_\_\_\_      No \_\_\_\_\_  
(Upon employment, you will be asked to produce two original forms of identification in accordance with the Immigration Reform and Control Act)

Present Position: \_\_\_\_\_ School: \_\_\_\_\_ Salary: \_\_\_\_\_

When can you begin work? \_\_\_\_\_

**CERTIFICATION**

			Field or Subject	Number	Date	State
Cert/Qual <input type="checkbox"/>	Prov <input type="checkbox"/>	Perm <input type="checkbox"/>	_____	_____	_____	_____
Cert/Qual <input type="checkbox"/>	Prov <input type="checkbox"/>	Perm <input type="checkbox"/>	_____	_____	_____	_____
Cert/Qual <input type="checkbox"/>	Prov <input type="checkbox"/>	Perm <input type="checkbox"/>	_____	_____	_____	_____

If you do not have a valid N.Y.S. certificate, describe your plan to obtain a certificate appropriate to the position for which you are applying \_\_\_\_\_

Have you passed the required teacher examinations?       YES       NO       NOT APPLICABLE

Are you or have you been a member of the NYS Employees or Teachers Retirement System?       YES \_\_\_\_\_  
(If yes, give membership number)  
 NO (Active within last 7 years)

Non-Discrimination Notice: The Mohonasen Central School District does not discriminate on the basis or race, color, national origin, creed, sex and age or handicap as decreed by Law, and is in compliance with Title IX of the Educational Amendments of 1972 and with Section 504 of the Rehabilitation Act of 1973.

**Applicants must furnish all information requested. Do not answer by saying "see resume." If additional space is needed for any answer, attach additional pages. Remember to sign statement on back page.**

**EMPLOYMENT HISTORY:** Begin with the most recent and use additional pages if necessary.

EMPLOYER	TELEPHONE	DATES EMPLOYED		DID YOU RECEIVE TENURE? DATE:
		FROM	TO	
ADDRESS				
JOB TITLE		SUMMARIZE THE NATURE OF THE WORK PERFORMED AND JOB RESPONSIBILITIES		
IMMEDIATE SUPERVISOR, TITLE & TELEPHONE				
REASON FOR LEAVING				
MAY WE CONTACT FOR REFERENCES? <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> LATER				
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REASON FOR LEAVING				
MAY WE CONTACT FOR REFERENCES? <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> LATER				

## EDUCATIONAL PREPARATION:

High School Attended \_\_\_\_\_ Are you a graduate?  YES  NO  
Major Subjects Degree

Undergraduate School (s) Attended \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Graduate School (s) Attended \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

## STUDENT TEACHING:

Dates	Name and Location of School	Subject or Grade Level	Cooperating Teacher
1.			
2.			

Placement Folder will be requested by applicant from: (Name and Address) \_\_\_\_\_  
 \_\_\_\_\_

Professional & Scholastic Organizations, Memberships, Honors (Exclude organizations the name or character of which indicates the race, color or national origin of its members)  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Have you ever been convicted of any crime or misdemeanor/felony other than a minor traffic violation?  Yes  No  
 If you checked "yes" please give details or reasons:

\_\_\_\_\_  
 \_\_\_\_\_

## UNITED STATES ARMED SERVICES RECORD

Dates From - To	Branch	Highest Rank	Do you have any continuing Reserve Obligations?

## ADDITIONAL REFERENCES FAMILIAR WITH YOUR WORK

Name	Position	Work Phone

### CANDIDATE'S STATEMENT

In your own handwriting indicate those strengths you have which will enable you to contribute to the educational programs of this District. Indicate attributes you feel would distinguish you from other candidates for this position.

### READ CAREFULLY BEFORE SIGNING

I hereby certify that the statement made and the information supplied are true and correct. I understand that falsification of any part of the application constitutes cause for rejection of application or dismissal after employment.

My signature below authorizes the Mohonasen Central School District to obtain any or all records or information regarding employment from my prior employers, notwithstanding any stipulations with respect to confidentiality. I waive my right or access to any information submitted by references. I further agree to take any physical examinations the District may deem necessary.

Signature \_\_\_\_\_ Date \_\_\_\_\_

**Return this application to:** Superintendent of Schools  
Mohonasen Central School District  
2072 Curry Road  
Schenectady, N.Y. 12303