



Please provide additional information for the position for which you are applying.

**Teacher/School Aide**

Indicate experiences that qualify you for working with children in a supervisory or instructional setting \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Are you interested in substitute work in this area?  Yes  No

**Nurse**

Indicate experiences that qualify you for working with children in a school setting \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Do you possess a license/certificate?  Yes  No License Type & # \_\_\_\_\_

Do you have New York State registration?  Yes  No If yes, expiration date \_\_\_\_\_

Are you interested in substitute work in this area?  Yes  No

**Clerical**

List software that you have the ability to use proficiently \_\_\_\_\_

\_\_\_\_\_

Have you taken any Civil Service Examinations for clerical positions:  Yes  No

If yes, When \_\_\_\_\_ Where \_\_\_\_\_

Title(s) \_\_\_\_\_ Score(s) \_\_\_\_\_

Are you interested in substitute work in this area?  Yes  No

**Custodial**

Have you had experience or training in institutional cleaning?  Yes  No If yes, explain \_\_\_\_\_

\_\_\_\_\_

Have you ever supervised others in an institutional cleaning operation?  Yes  No If yes, explain \_\_\_\_\_

\_\_\_\_\_

Have you taken any Civil Service Examinations?  Yes  No

If yes, When \_\_\_\_\_ Where \_\_\_\_\_

Title(s) \_\_\_\_\_ Score(s) \_\_\_\_\_

Are you interested in substitute work in this area?  Yes  No

**Technology/Maintenance**

Indicate experience or training that qualifies you for the position you are seeking. \_\_\_\_\_

\_\_\_\_\_

Do you possess a license/certificate?  Yes  No Type/# \_\_\_\_\_

### Employment Experience

List most recent experience first. List all prior employers. Use additional sheet if needed. Do NOT OMIT any employment. Failure to list your complete employment record will disqualify you from employment at the Harrison Central School District.

#### Present Employment

Name & Address of Employer	Supervisor's Name & Title	From		To		Reason for Leaving
		Mo.	Yr.	Mo.	Yr.	
	Phone:					
Your job title:						
Brief description of responsibilities:						
_____						
_____						
_____						
_____						

#### Previous Employment

Name & Address of Employer	Supervisor's Name & Title	From		To		Reason for Leaving
		Mo.	Yr.	Mo.	Yr.	
	Phone:					
Your job title:						
Brief description of responsibilities:						
_____						
_____						
_____						
_____						

Name & Address of Employer	Supervisor's Name & Title	From		To		Reason for Leaving
		Mo.	Yr.	Mo.	Yr.	
	Phone:					
Your job title:						
Brief description of responsibilities:						
_____						
_____						
_____						
_____						

## MORAL CHARACTER

Please answer the following questions.

1. Have you ever been dismissed from, resigned from, entered into a settlement agreement, or otherwise left employment to avoid investigation and/or dismissal for alleged misconduct or due to performance concerns?  Yes  No
2. Are you the subject of any pending investigation and/or disciplinary charge(s) pertaining to employment?  Yes  No
3. Have you ever been convicted of a crime other than minor traffic violations? If yes, include the date, offense(s) and disposition in your separate explanation.  Yes  No
4. Do you currently have any criminal charges pending against you?  Yes  No

If you answer "Yes" to any of these questions, please explain below (attach additional pages and supporting documentation as needed).

---

---

---

---

---

### United States Armed Services Record

Dates of Service From: \_\_\_\_\_ To: \_\_\_\_\_

Branch of Service: \_\_\_\_\_ Highest Rank: \_\_\_\_\_

Did you receive an honorable discharge?  Yes  No

My signature below authorizes the Harrison Central School District to conduct a background investigation and authorizes release of information in connection with my application for employment. This investigation may include such information as criminal convictions, driving records, previous employers and educational institutions, personal references, professional references, and other appropriate sources. I waive my right of access to any such information, and without limitation hereby release the Harrison Central School District and the reference source from any liability in connection with its release or use.

Furthermore, I certify that I have made true, correct and complete answers and statements on this application in the knowledge that they may be relied upon in considering my application, and I understand that any omission or false statements made by me on this application, or any supplement to it will be sufficient grounds for failure to employ or for my discharge should I become employed with the Harrison Central School District.

Signature of Applicant \_\_\_\_\_ Date \_\_\_\_\_