Brentwood Union Free School District

Human Resources 52 Third Avenue Brentwood, NY 11717 (631) 434-2331

Thank you for your interest in working for the Brentwood School District as a **Call-In Office** Assistant.

Please be advised that when you apply for a call-in office assistant position, it is on a Call-In as needed basis (you will be called if someone is out and in need of a substitute). In addition, you are required to be fingerprinted **prior** to working, and there is a charge that goes to the New York State Education department to process your fingerprints.

All applications with requirements listed below must be mailed or delivered by appointment only to the Human Resources Office at 52 Third Avenue, Brentwood, NY 11717. Applications can also be emailed to <u>Carolina.Sosa@bufsd.org.</u>

Requirements to complete an application.

- High School Diploma
- Resume
- Fingerprint Clearance
- 3 References *(must be in a sealed envelope or can be emailed to Carolina.Sosa@bufsd.org)
- Photo ID
- Original Social Security Card

Please be aware that the call-in (substitute) office assistant rate is \$15.00 per hour.

BRENTWOOD UNION FREE SCHOOL DISTRICT HUMAN RESOURCES DEPARTMENT Anthony F. Felicio Administration Building Brentwood, New York 11717

EMPLOYMENT APPLICATION – CALL-IN OFFICE ASSISTANT

THE BRENTWOOD UNION FREE SCHOOL DISTRICT ADHERES TO FEDERAL LAWS PROHIBITING DISCRIMINATION ON ANY APPLICANT BECAUSE OF RACE, CREED, COLOR NATIONAL ORIGIN, HANDICAP, SEX, AGE, MARITAL STATUS OR SEXUAL PREFERENCE.

PLEASE PRINT

POSIT	TION DESIRED- CALL-IN OFFICE ASSISTANT	
LAST	Γ NAME FIRST NAME	M.I.
MAIL	LING ADDRESS	
TELE	EPHONE#	
1.	Have you ever worked for the Brentwood School District?	
	If yes, please indicate position held.	
2.	Have you ever been convicted of any crime (felony or misdemeanor)?	
3.	Do you have any pending arrests?	
	Signature Dates	
4.	Were you ever dismissed or discharged from any employment for reasons other than lack of	work or funds?
5.	Did you ever resign from any employment rather than face dismissal?	
6.	Did you ever receive a discharge from the Armed Forces of the United States that was other to other than honorable circumstances?	than honorable or was issued under
If you	u answered YES to questions 2 through 6, you MUST give specifics in the COMMENTS secti	on below:
relatio	of the above circumstances represents an automatic bar to employment. Each case is considered on to the duties and responsibilities of the position for which you are applying. Background invide idates considered for employment. A false statement may result in the disqualification of your a	estigations may be conducted on all

COMMENTS:

SUCCESSFUL COMPLETION OF AN APPROPRIATE MEDICAL EXAMINATION MAY BE REQUIRED.

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EDUC	CATION:
1.	Have you graduated from senior high school? If so, what year?
	Name of School
	Location
2.	If you have a high school equivalency diploma, indicate:
	Issuing Authority
	Date
3.	If you did NOT graduate from high school, indicate highest school year completed
4.	List College, University or Professional School Attended:
	School
	Dates Attended Date Graduated
	Degree/Certificate/Credits Received
	School
	Dates Attended
	Degree/Certificate/Credits Received
	VER'S LICENSE Trole the class of your New York State Motor Vehicle License
1 2	2 3 4 5 6 A B C D E M
2. Da	te of Expiration ID Number
	INSES have obtained a license, certificate or other authorization to practice a trade or profession, please fill in below:
1.	Name of Trade or Profession
2.	License Number
3.	Granted by (licensing agency)
4.	Specialty
5.	Date License First Issued
6.	Registered From To

LENGTH OF EMPLOYMENT	FIRM NAME	ADDRESS	TELEPHONE#
MO. YR. MO. YR.			
FROM / TO /			
EARNINGS (Circle One)	DUTIES:		
/WK /MO /YR			
TYPE OF BUSINESS			
YOUR EXACT TITLE			
SUPERVISOR'S TITLE			
Average no. of hrs.			
worked per week			
exclusive of overtime	FIDMANAAF	4000500	
LENGTH OF EMPLOYMENT	FIRM NAME	ADDRESS	TELEPHONE#
MO. YR. MO. YR. FROM / TO /			
EARNINGS (Circle One)	DUTIES:		
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REFERENCES

It is the responsibility of the candidate to make sure all references are on file in the Human Resources Office. (Reference forms are attached. Relatives may not be used as references).

NAME	ADDRESS	TELEPHONE #

PLEASE BE ADVISED THAT INCOMPLETE APPLICATIONS WILL BE DISCARDED AT THE END OF THE SCHOOL YEAR

I CERTIFY THAT THE AFOREMENTIONED INFORMATION IN THIS APPLICATION IS TRUE TO THE BEST OF MY KNOWLEDGE. I UNDERSTAND THAT FALSE OR INCOMPLETE STATEMENTS SHALL BE SUFFICIENT CAUSE FOR DISQUALIFICATION OR DISMISSAL REGARDLESS OF THE DATE OF DISCOVERY

DATE:	SIGNED

THE BRENTWOOD PUBLIC SCHOOLS COMPLIES WITH TITLE IX GUIDELINES AND IS AN EQUAL OPPORTUNITY EMPLOYER.

Brentwood Union Free School District Anthony F. Felicio Administration Center Human Resources Department 52 Third Avenue Brentwood, NY 11717

OFFICE ASSISTANT REFERENCE FORM

is applying for the position of: Call-In Office Assistant

in the Brentwood Public School District. Please give us your most candid opinion of this person's performance in this position. Your reply will be strictly confidential.

	1	1		Γ	T	T	
Personal Qualities	P O R	F A I R	A V E R A G E		E	U N K N O W N	Professional and Social Qualities
Tact							Ability to deal with the public
Use of voice							English usage, written and ve
Energy level							Intellectual ability
Initiative							Cooperation
Responsibility							Response to criticism
Trustworthiness							Following directions
							Reasoning ability
							Understanding children
s there any reason that the applicant						sful i	
f yes, describe							

Would you hire the applicant to work in a Public School? Yes No

What is your relationship to the applicant and how long have you known him/her?

Your Signature

Print Your Name

Your Telephone No.

Your Position

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