

HOLLAND CENTRAL SCHOOL DISTRICT

103 Canada Street
Holland, New York 14080

APPLICATION FOR EMPLOYMENT INSTRUCTIONAL

Holland Central School District is in compliance with the U.S. Civil Service Rights Act of 1964. Title IX Educational Amendments of 1972, Part 86 and the Americans with Disabilities Act of 1990. The District provides equal employment opportunity to all individuals and does not discriminate on the basis of race, color, religion, national origin, ancestry, sex, age or handicap. Compliance Officer is Superintendent of Schools.

NAME _____
Date _____ / _____ / _____

POSITION FOR WHICH APPLICATION IS MADE _____

DO NOT WRITE IN THIS SPACE

INTERVIEW DATE (S) _____ / _____ / _____
 _____ / _____ / _____

BY WHOM _____

APPLICATION FORM

All information contained herein will be kept strictly confidential

I. General Information

Name _____ (Last) _____ (First) _____ (Initial) Soc. Sec. No. _____

Is any additional information relative to change of name, use of assumed name or nickname necessary to enable a check on your work record: If yes, please explain on a separate sheet of paper.

Present Address: Street _____ Telephone _____
 City _____ State _____ Zip Code _____
 Home Address: Street _____ Telephone _____
 City _____ State _____ Zip Code _____

Position for which application is made:
 _____ Teacher _____ Other _____

Grade Level (s)/Subject (s) _____

Earliest date available for employment at Holland Central School _____ / _____ / _____

II. Personal Information

Are you a citizen of the U.S.A.? _____ Are you over the age of 18? _____ If not, state your age _____

Are you presently a member of the N.Y.S. Teachers Retirement System? _____

If yes, please supply your retirement number _____

All persons appointed on a full time basis must become members of the New York State Teachers Retirement System. Have you ever been convicted of a crime in the past ten years? _____ Are any criminal charges or proceedings pending against you? _____ If yes to either or both of the above, please explain on a separate sheet.

III. EDUCATION AND PROFESSIONAL PREPARATION

High School _____ Location _____ Year Graduated _____

College/ University Degrees Earned	Name of School	Location	Subject/Field	Awarded	Awarded

Before appointment is granted, applicant must arrange to have complete certified transcripts of his/her entire college/university record sent directly to the Superintendent.

Teacher Student Teaching	Name of School	Location	Grade/Subject	Dates	Sponsoring

Certification	Field	Provisional Or Permanent	Effective Date	Expiration Date	Certificate Number
New York State					
Out of State					

If you do not hold N.Y. S. Certification in the subject, grade or field for which you are applying, please complete the following:

Have you met certification requirements at a N.Y. S. Institution? _____

If yes, what field? _____

List Honors Received, Special Achievements and Organizations

IV. Teaching Experience (List in Chronological Order)

Name and Location of School	Dates		Number School Years	Grades/ Subjects
	From	To		

Annual salary in present (or last) teaching position _____ (Do not include extra-curricular pay)

V. Non-Teaching Experience (Business, Trade or Industrial Employment)

Employer	Location	Type of Work	Inclusive Dates	Part or Full Time

Military Service (limit your responses to U.S. Armed Forces or a State Militia)	Dates		Type of Discharge	Branch	Final Rank
	From	To			

Are you a member of any military reserve unit? _____ If yes, please identify _____

VI. INTERESTS AND ACTIVITIES

List here the musical instruments you play, your sports, your hobbies, your interests, any other leisure time activity, directed school activities, etc.

VII. REFERENCES

1. List persons such as superintendents, principals, or supervisors who are familiar with your professional work. If you have had no teaching experience, list critic teachers, sponsoring teachers and/or college instructors with whom you have taken your major subjects. You need not list individuals whose references are included in confidential placement bureau folders.

Name	Phone Include Area Code	Address	Position of Reference at time of Employment

2. Are you registered with a University/College Placement Office? _____ If yes, please give address _____
Please authorize Placement Office to forward folder.

VIII. ADDITIONAL INFORMATION Please add any additional statement(s) you wish that you feel would help your candidacy.

IX. I HEREBY CERTIFY THAT THE FACTS SET FORTH IN THE ABOVE EMPLOYMENT APPLICATION ARE TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE. I FURTHER ACKNOWLEDGE THAT ANY FALSIFICATION OR OMISSION WILL BE SUFFICIENT CAUSE FOR DISQUALIFICATION, OR DISMISSAL IF EMPLOYED, REGARDLESS OF WHEN DISCOVERED. I HEREBY AUTHORIZE YOU TO CHECK THE ACCURACY OF THE INFORMATION CONTAINED IN THIS APPLICATION.

Dated _____

SIGNATURE OF APPLICANT _____