APPLICATION FOR STUDENT TEACHING

Instructions: When submitting this application, please be certain that all items have been completed and that all accompanying materials, including **current resume**, **transcripts**, **confidentiality agreement** and **eligibility letter** are included, and that the statement below is signed.

Name:_____

Address: _____

Phone #: _____ Email address:_____

Have you been fingerprinted by New York State Dept. of Education? Yes □ No □

College / Institution Currently Enrolled:_____

Field of Study: _____

Degree and/or Certification being pursued: _____

Anticipated date degree or certification will be awarded: _____

Name and title of Faculty Supervisor:_____

Phone Number and Email of Faculty Supervisor:_____

Building Placement(s): Elementary □ Middle School □ High School □

Placement start date: _____ Placement end date: _____

Number of hours per week at location: _____

Experience and References

Beginning with the most recent, please provide the names, title, phone numbers, and email addresses of three professional references we may contact. Do not include family members or friends.

1. Name/Title: _____ Contact: _____
2. Name/Title: _____ Contact: _____
3. Name/Title: _____ Contact: _____

On a separate page, please describe what specific knowledge, skills, or techniques you expect to learn from this experience. Please keep your answer between 100-150 words.

Application continues on next page

Have you ever been dismissed from a position?	Yes □	No □
Have you ever been asked to resign as an alternative to dismissal?	Yes □	No □
Have you ever resigned from a position rather than face disciplinary action?	Yes □	No □
Has any disciplinary action been brought against you that resulted in your being discharged from employment?	Yes □	No □
Have you ever been convicted of any crime, felony, or misdemeanor*, or are you now under charges for any crime (other than minor traffic violations) or forfeited bail bond posted to guarantee your appearance in court to answer any charges?	Yes □	No □
Have you ever had a teaching credential revoked, suspended, or annulled, or had disciplinary proceedings initiated against you pursuant to New York State Education Law Section 3020?	Yes □	No □

If you answered YES to any of the questions above, provide on a separate sheet of paper the specifics or an explanation for the response. If you elect not to provide specifics, however, or if such explanation is insufficient, a confidential investigation may be initiated. None of the above circumstances represents an automatic bar to volunteer employment.

*Submit official copies of the court record, including disposition of the case.

I voluntarily give Dobbs Ferry School District the right to investigate my past employment and all statements contained in this application.

I certify that the above answers are true and complete and that I am aware that any material and deliberate falsification of fact on the above is grounds for discharge.

SIGNED _____ DATE: _____

Please return the completed application and supporting materials to:
Elizabeth Saperstein, Asst. to Superintendent/District Clerk
Dobbs Ferry School District
505 Broadway – Dobbs Ferry, NY 10522
sapersteine@dfsd.org

FOR OFFICE USE ONLY:

RECEIVED: _____ DATE: _____

APPROVED: _____ DATE: _____