Application for Employment
Non-Instructional Personnel (Clerical, Building & Grounds, Transportation, Teacher Aide, School Lunch)

Date: _______________________________

Position Sought: _______________________________________________________________________________

Name: _______________________________________________________________________________________

Present Address: _______________________________________________________________________________

<table>
<thead>
<tr>
<th>Street</th>
<th>City/Village/Town</th>
<th>State</th>
<th>Zip Code</th>
</tr>
</thead>
</table>

Telephone Number: ____________________________________

Person to Notify in Case of Emergency: _____________________________ Telephone Number: ______________

PERSONAL INFORMATION

Are you at least 18 years of age? ………………………………………………………………………. Yes (  )     No (  )

Have you served in the armed forces? ……………………………………………………………. Yes (  )     No (  )

Are you a citizen of the United States? …………………………………………………………… Yes (  )     No (  )
If not, do you intend to become a citizen? ………………………………………………………….. Yes (  ) No (  )
If not, do you have the legal right to remain permanently in the United States? ………… Yes (  )     No (  )

Have you ever been convicted of any violation of law except for minor traffic violations? ……… Yes (  )     No (  )
If yes, give details on a separate sheet.

Do you have any impairments, physical, mental, or medical, which could interfere with your ability
to perform the job for which you have applied? …………………………………………. Yes (  )     No (  )
If yes, give details on a separate sheet.

EDUCATIONAL BACKGROUND

<table>
<thead>
<tr>
<th>Level</th>
<th>Name</th>
<th>Location</th>
<th>Graduated Yes/No</th>
<th>Degree</th>
<th>Course of Major</th>
</tr>
</thead>
<tbody>
<tr>
<td>High School</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Technical School</td>
<td></td>
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</tr>
<tr>
<td>College</td>
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<tr>
<td>Other</td>
<td></td>
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</tbody>
</table>

Have you had training in school for the job for which you applied? ……………………………… Yes (  )     No (  )
If yes, where? _____________________________
Duration of training? ____________________________________
When? ____________________________________
**Work Experience**

List below the places where you have worked. Begin with your present, or last place of employment.

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**Name of Employer**
__________________________________________________________________________

**Address:**

<table>
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<th>Street</th>
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<th>Zip Code</th>
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</thead>
</table>

**Job Title**

**Your Supervisor & Title**
__________________________________________________________________________

**Employed from**

<table>
<thead>
<tr>
<th>Month/Year</th>
<th>Month/Year</th>
</tr>
</thead>
</table>

**Your Salary**

**Reason for Leaving:**

__________________________________________________________________________

**Brief Description of the work you did:**

__________________________________________________________________________

---

**Name of Employer**
__________________________________________________________________________

**Address:**

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</table>

**Your Salary**

**Reason for Leaving:**

__________________________________________________________________________

**Brief Description of the work you did:**

__________________________________________________________________________

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(Any other significant work experience should be listed on a blank sheet of paper and attached to this application.)

**What other work experience have you had that will help you in the work for which you are applying?**

_________

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**Can you work full time?**

Yes ( ) No ( ) If not, state the hours you can work. __________________________

**Can you work year round?**

Yes ( ) No ( ) If not, state the months you can work. __________________________

**Are you able to work in all schools?**

Yes ( ) No ( ) If not, in which are you able to work. __________________________

**What is the minimum salary for which you will work?**

______________________________________________

**Have you previously filled out an application in this school district?**

Yes ( ) No ( )

If yes, for what job?

______________________________________________

**Were you ever dismissed from any public (government) employment?**

Yes ( ) No ( )

If yes, give details on a separate sheet of paper.

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**Are you a member of the NYS Employees Retirement System?**

Yes ( ) No ( )

If yes, give membership number.

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**Do you have an open compensation claim pending?**

Yes ( ) No ( )

If yes, give details on a separate sheet.
List below three personal references who will vouch for your character and integrity. Do not include relatives or former employers.

<table>
<thead>
<tr>
<th>Name</th>
<th>Address</th>
<th>Phone Number</th>
</tr>
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<tbody>
<tr>
<td>1.</td>
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<tr>
<td>2.</td>
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<tr>
<td>3.</td>
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Applications for Clerical Positions Only

With what business or office machines are you experienced?

Applications for Buildings and Grounds Position Only

With what tools or machines are you experienced?

Applications for Automotive Mechanic and Service Positions Only

Do you have a Class Three (3) License? Yes ( ) No ( )

Applications for Bus Driver Positions Only

Class of drivers license: _______________ Expiration date of such license: _______________

Motorist Identification number: ___________________________ State of Issuance: _______________

Have you ever had an accident, which resulted in injuries to yourself or others? Yes ( ) No ( )
If yes, give details on separate sheet.

Have you ever been convicted of moving traffic violations in the past 3 years? Yes ( ) No ( )
If yes, give details (date, charge, court, and location on separate sheet.

How many years have you driven? ________ How many years of active driving experience do you have for the following types of vehicles: School Bus _____ Passenger Bus or Heavy Truck _____ Light Truck or Station Wagon _____

I authorize investigation of all matters contained in this application and agree that, if in the opinion of school official any misrepresentation has been made by me herein, or the results of such investigation are not satisfactory, any offer of employment made may be withdrawn, or my employment terminated immediately, without any obligation or liability to me other than for payment at the rate agreed upon for services actually rendered, if I have been employed.

Date _______________________ Signature _________________________________________________________

Please mail application and resume to:       ATTN:  David Foster
                                              Wellsville Central School
                                              126 West State Street
                                              Wellsville, NY  14895

Wellsville Central School is an Equal Opportunity Employer.