

Wellsville Central School District

126 West State Street - Wellsville, New York 14895 - (585) 596-2170

"Our mission is to prepare our students to be successful, contributing members of their communities through excellence in education"

Application for Professional Employment

Applicant's Full Name: _____
(Last) (First) (M.I.) (Maiden Name)

Other Name(s): _____ **Teacher's Retirement No.** _____ **Tier** _____
(Please provide any additional information relative to change of name, use of an assumed name or nickname, necessary to enable a check on your work or school record.)

Present Mailing Address: _____
(Street) (City) (State) (Zip)

Permanent Mailing Address: _____
(Street) (City) (State) (Zip)

Telephone Numbers: () _____ () _____ () _____
(Present) (Permanent) (Work)

My signature below authorizes the 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 or civil 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 school district and the reference sources 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, falsely answered statement 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 school district.

Date: _____ **Signature of Applicant:** _____

Indicate Position(s) for Which You Are Applying:

() Teacher () Psychologist () Library/Media () Other _____
() Administrator () Counselor () Substitute Teacher

List grade level(s) and/or subject area(s) in order of preference: _____

Are you a U.S. citizen?
() Yes () No

If not, are you eligible to work in the U.S.?
() Yes () No

Please mail application, resume, transcripts, and placement file complete with letters of reference to:

Mr. David Foster
Wellsville Central School District
126 West State St.
Wellsville, NY 14895

The Wellsville Central School District is an equal opportunity employer.

I. Experience: Please list your experience chronologically, beginning with the most recent. Include both substitute and student teaching experiences if they have occurred in the last five years. This section must be completed in full - do not indicate "see resume." **Names and addresses for all organizations you have worked for must be listed. Please attach additional sheet, if needed.**

Employer: _____
Address: _____ Telephone: _____
Dates of employment (month/year) From: _____ To: _____ Supervisor: _____
Position / Title: _____
Description of Duties: _____
Reason for Leaving: _____

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II. Education and Professional Training (List chronologically.)

Level of Education	Name of School or University	State	Field of Study	Type of Degree	Year of Graduation	Dates of Attendance From.....To
High School						
College/University						

III. Military Experience:

Branch of Service	Occupational Specialist (MOS)	Inclusive Dates	Type of Discharge

IV. Certification: (Please enclose a photocopy of your New York certificate)

Areas of New York State Certification:	Certification #	Type of Certification
1.		Initial () Prof () _____ Permanent () (Date of Expiration)
2.		Initial () Prof. () _____ Permanent () (Date of Expiration)
3.		Initial () Prof. () _____ Permanent () (Date of Expiration)

If you have been issued a certificate in another state, please enclose a photocopy.

State _____ Expiration Date _____ Certification/Endorsements _____

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Have you taken the National Teacher’s Examination? **(If yes, please submit a copy of your scores.)**

Core Battery: () No () Yes Month _____ Year _____

Specialty Area: () No () Yes Month _____ Year _____ Subject _____

V. General Information:

Month, Day and Year available for employment _____ Are you under contract?..... () No () Yes

If yes, where? _____ Present Position _____

If presently employed, why do you wish to change? _____

If under contract, what type? () Probationary () Continuing/Tenure () Other (explain) _____

If not under contract now, have you ever held a tenured position in New York?..... () No () Yes

If yes, cite school district(s) and date(s) _____

Have you ever been refused tenure? (If yes, explain on back.) () No () Yes

Have you ever been discharged or requested to resign from a position? (If yes, explain on last page) () No () Yes

Have you ever been convicted of a violation of law other than a minor traffic violation? (If yes, explain on back.) () No () Yes

Have you ever had a certificate or license revoked or suspended? (If yes, explain on back.) () No () Yes

Are any criminal charges or proceedings pending against you? () No () Yes

VI. Professional References:

It is the applicant’s responsibility to provide the school district with the following information in order to be considered for employment:

- A. The names of at least three reference sources must be provided and must include current employer, if employed, or last employer, if not currently employed.
- B. Unless included in placement file, applicants with work experience must provide recommendations from principals and/or superintendents from all contracted educational work experiences within the past three years. If experience was not within the past three years, provide references from last contracted experience.

Applicants who are beginning teachers registered with a college placement office must include references from their student teaching supervisor(s) and cooperating teacher(s) in the placement file or by listing their names below.

Name of Reference	Position/Relationship	Mailing Address	Phone Number
1.			
2.			
3.			

VII. Extracurricular Activities:

List those extra-curricular activities you are interested in coaching/supervising.

VIII. Other Information:

To avoid conflict of interest, list any local school board member or employee relative(s) in the school district and cite relationship.

Estimate your total absence from work or school for the last three years and explain the reason(s).

Explain any physical or mental conditions, which would adversely affect your ability to perform the duties of the position you seek; or, if there are none, so state.

In your own handwriting, provide any additional information you desire that will afford an additional understanding of your qualifications. Your goals, objectives, philosophy, and other background factors are of special interest.

Additional Remarks and/or Explanations for Section VII General Information

Attach sheet if needed

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The Wellsville Central School District does not discriminate on the basis of race, color, national origin, sex, age, religion, political affiliation, or handicapping conditions in its educational programs or employment. No person shall be denied employment solely because of any impairment, which is unrelated to the ability to engage in activities involved in the position or program for which application has been made.