



## ■ TENURE STATUS

Were you ever appointed to tenure in a public school district in New York State?  Yes  No If yes, please complete:

Tenure Area \_\_\_\_\_ Date Tenure Granted \_\_\_\_\_

Name and address of school district where tenure was granted \_\_\_\_\_

Following the conferral of tenure, were you ever dismissed from any school district pursuant to New York Education Law section 3012 and 3020-a?  Yes  No

## ■ CERTIFICATION/PROFESSIONAL LICENSE INFORMATION

*It is the applicant's responsibility to have official college transcripts, placement folder (if available), or a minimum of three written references and a copy of any certification or licensure issued by the State of New York forwarded to the Human Resource Services office.*

A. I hereby certify that I hold a teaching certificate issued by the State of New York as follows:

Area of Certification	Form (certification of qualification, initial, provisional, permanent, professional)	Date

B. A candidate not officially certificated to teach in the public schools of New York State should give the status of his or her application, if any, as follows (check one):

Application submitted to and approved by the NYS Department of Education – certificate forthcoming.  
 Application filed, decision pending.  Application not filed.

C. Have you taken the required New York State Teacher Examination?  Yes  No

D. List non-New York State Teaching certificates. \_\_\_\_\_

E. List any New York State professional licenses you hold. \_\_\_\_\_

F. If you are not certified or licensed, but are working toward certification or license, please summarize your present status.

\_\_\_\_\_

\_\_\_\_\_

## ■ SPECIAL SKILLS AND ABILITIES

List any special skills and abilities

\_\_\_\_\_

## ■ EMPLOYMENT HISTORY (most recent first, all areas for each employer **must** be completed.)

Employer	Telephone	Dates Employed		Full or Part-time	Salary
		From	To		
Address					
Job Title		Summarize the nature of work performed and job responsibilities.			
Immediate supervisor, title and telephone					
Reason for leaving					
May we contact for reference? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Later					

## ■ EMPLOYMENT HISTORY (continued)

Employer	Telephone	Dates Employed		Full or Part-time	Salary
		From	To		
Address					
Job Title		Summarize the nature of work performed and job responsibilities.			
Immediate supervisor, title and telephone					
Reason for leaving					
May we contact for reference?		<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Later			
Employer	Telephone	Dates Employed		Full or Part-time	Salary
		From	To		
Address					
Job Title		Summarize the nature of work performed and job responsibilities.			
Immediate supervisor, title and telephone					
Reason for leaving					
May we contact for reference?		<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Later			
Employer	Telephone	Dates Employed		Full or Part-time	Salary
		From	To		
Address					
Job Title		Summarize the nature of work performed and job responsibilities.			
Immediate supervisor, title and telephone					
Reason for leaving					
May we contact for reference?		<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Later			

## ■ OTHER REFERENCES FAMILIAR WITH YOUR WORK

Name	Address	Phone	How known

## ■ PERSONAL STATEMENT

Briefly summarize your thoughts on educating students including any special talents that you would bring to the position which would have a positive impact on student achievement. <b>Please submit as an attachment.</b>
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The Washington-Saratoga-Warren-Hamilton-Essex BOCES does not discriminate in its employment and admission to programs and activities as applicable, on the basis of actual or perceived race, color, creed, sex, sexual orientation, national origin, religion, age, economic status, marital status, veterans' status, political affiliation, domestic victim status, use of a guide dog, hearing dog or service dog, disability, or other classifications protected under federal or state law, and provides equal access to the Boy Scouts and other designated youth groups. The designated district compliance officers will coordinate compliance with the nondiscrimination requirements of Title VI and Title VII of the Civil Rights Act of 1964, Title IX of the Education Amendments of 1972, Section 504 of the Rehabilitation Act of 1973, the Age Discrimination Act of 1975, the Americans with Disabilities Act of 1990, as amended, the Boy Scouts of America Equal Access Act, and the New York State Human Rights Law. The BOCES Compliance Officers are: Donna J. Wisenburn, Director of Human Resource Services or Timothy G. Place, Deputy District Superintendent, Washington-Saratoga-Warren-Hamilton-Essex BOCES, 1153 Burgoyne Avenue, Suite 2, Fort Edward, NY 12828, phone (518) 581-3310 or 746-3310. Complaints may also be filed with the Office for Civil Rights, New York Office, U.S. Department of Education, 32 Old Slip, 26th Floor, New York, NY 10005-2500, phone (646) 428-3800, fax (646) 428-3843, email: [OCR.NewYork@ed.gov](mailto:OCR.NewYork@ed.gov)

**■ BACKGROUND INFORMATION:**

Veteran of U.S. Military: \_\_\_\_\_ Discharge Type: \_\_\_\_\_  
Branch: \_\_\_\_\_ Discharge Date: \_\_\_\_\_

Have you ever been fingerprinted for the purpose of employment?  Yes  No  
If yes, where? \_\_\_\_\_ When? \_\_\_\_\_

Have you been cleared by NYSED for employment?  Yes  No

Are you legally eligible for employment in this country?  Yes  No

Have you ever been convicted of a crime? (felony or misdemeanor) If yes, complete convictions section below.  Yes  No

Are any criminal charges pending against you?  Yes  No

Have you ever forfeited bail or bond following your appearance as a defendant in a criminal court action?  Yes  No

Have you ever received an unsatisfactory rating in conjunction with any employment?  Yes  No

Have you ever been disqualified for employment for any civil service position?  Yes  No

Have you ever been discharged or required to resign from any position (other than staff reduction layoffs)?  Yes  No

Have disciplinary charges ever been preferred against you by an employer?  Yes  No

If yes, were the charges sustained?  Yes  No

Have you ever resigned as an alternative to facing charges or dismissal?  Yes  No

Have you ever had a license or certification denied or terminated because of unsatisfactory teaching, fingerprints, or medical record?  Yes  No

Have you ever had any professional certificate or license denied, revoked, or suspended by any government agency as a result of your record?  Yes  No

Has a Family Court or any other court ever rendered a finding indicating that you have abused or neglected a child? (If yes, complete the confidentially held information below)  Yes  No

Date and nature of the finding: \_\_\_\_\_

Name of the court: \_\_\_\_\_

Name of the judge: \_\_\_\_\_

**CONVICTIONS:**

Charge: \_\_\_\_\_ Court: \_\_\_\_\_ Year: \_\_\_\_\_

Conviction: \_\_\_\_\_

I certify that all statements made by me on this application are true and complete to the best of my knowledge. I understand that any false or misleading statements will be considered justification for disqualification of my application or termination of employment. I authorize an investigation of all statements herein and further authorize all cited references to give you any and all information they may have, and release all parties from all liability for any damage that may result from furnishing same to you. I authorize the BOCES to check my references, to obtain information from my former employers and educational institutions, to take other action to investigate any information provided in my employment application, and to obtain information relevant to evaluation my qualifications and fitness for a position. I authorize the WSWHE BOCES to obtain information about my criminal record and authorize all government agencies to provide information about my criminal record to the WSWHE BOCES.

**DATE** \_\_\_\_\_ **SIGNATURE OF APPLICANT** \_\_\_\_\_  
**Application invalid without signature and date**

**Please send completed documents to:**  
**Human Resource Service Office**  
**WSWHE BOCES**  
**1153 Burgoyne Ave., Suite 2**  
**Fort Edward, NY 12828**