



PULASKI ACADEMY & CENTRAL SCHOOLS

2 Hinman Road • Pulaski, NY 13142
(315)298-5188 • FAX (315)298-4390

EMPLOYMENT APPLICATION FORM

This application becomes part of your record. All parts must be completed in full.

Please indicate which position you are applying for:

ADMINISTRATOR	_____	BUS DRIVER	_____
TEACHER	_____	CLEANER	_____
TEACHING ASSISTANT	_____	CUSTODIAL	_____
AIDE/MONITOR	_____	FOOD SERVICE	_____
CLERICAL	_____	MECHANIC	_____

I am applying for a substitute position in the following position(s):

ADMINISTRATOR	_____	BUS DRIVER	_____
TEACHER	_____	CLEANER	_____
TEACHING ASSISTANT	_____	CUSTODIAL	_____
AIDE/MONITOR	_____	FOOD SERVICE	_____
CLERICAL	_____	MECHANIC	_____

PERSONAL INFORMATION:

Full Name: _____
Last First Middle Social Security #

Home Phone # _____ Daytime Phone # _____

Home Address: _____
Street City State Zip Code

E-Mail Address: _____

Have you received fingerprint clearance through the NYS Education Department? Yes No

Have you ever been convicted of a crime? Yes No

If yes, please give details: _____

Pulaski Academy and Central School will consider applicants for all positions without regard to race, color, religion, sex, national origin, age, marital status, veteran status, medical condition or disability, or any other legally protected status.

THIS APPLICATION WILL BE KEPT ON FILE FOR ONE YEAR

EDUCATIONAL BACKGROUND:

High School/University/College

Degree or Diploma

Field or Major

of Graduate School Credits: _____

WORK EXPERIENCE (list most recent experience first):

This section must be completed in full.

Employer:

Telephone #:

Address:

Dates of Employment (month/year) From:

To:

Supervisor:

Position/Title:

Description of Duties:

Reason for Leaving:

Employer:

Telephone #:

Address:

Dates of Employment (month/year) From:

To:

Supervisor:

Position/Title:

Description of Duties:

Reason for Leaving:

Employer:

Telephone #:

Address:

Dates of Employment (month/year) From:

To:

Supervisor:

Position/Title:

Description of Duties:

Reason for Leaving:

CERTIFICATION INFORMATION – for Teaching Applicants

If the position you are seeking requires certification, the following must accompany this application:

- Placement file/transcripts
- Copy of valid teaching certificate/license
- Resume

Do you hold a valid NYS Teaching Certificate/License? (circle) Yes No

If yes, please indicate area and type: _____

Did you ever acquire tenure in a New York State District (circle) Yes No

If Yes, where? _____ When? _____

Tenure Areas _____

Have you ever been denied Tenure? _____

Have you ever left a position to avoid denial of tenure or resigned to avoid termination? _____

PROFESSIONAL REFERENCES:

List four individuals, whom you are not related to, who have knowledge of your professional training, ability, experience and personal character.

Name	Address	Phone (home/business)	Occupation

Briefly explain your reason for applying for this position and why you feel you should be hired.

I understand that Pulaski Academy and Central School will thoroughly investigate my work and personal history and verify all data given on this application, on related papers, and in interviews. I authorize all individuals, schools and firms named herein, except my current employer if so noted below, to provide any information requested about me, and I release them from all liability in providing this information.

Applicant’s Signature: _____ **Date:** _____