

NEWARK VALLEY CENTRAL SCHOOLS

68 Wilson Creek Road, PO Box 547 Newark Valley, NY 13811 (607) 642-3221

INSTRUCTIONAL APPLICATION

TO THE CANDIDATE:

We are pleased that you are interested in joining our professional family. The schools of the Newark Valley Central School District strive to provide excellence in both our educational and extracurricular programs.

We seek staff members who are highly competent in their field, who enjoy working with young people, who are dedicated to the advancement of learning, and who serve as role models for our entire school-community. If you possess these qualities and have appropriate certification, we encourage you to apply.

THE APPLICATION WILL NOT BE CONSIDERED COMPLETE WITHOUT A COPY OF TRANSCRIPTS, CERTIFICATION AND AT LEAST THREE (3) LETTERS OF PROFESSIONAL REFERENCE. TO BE CONSIDERED, *ALL* SECTIONS OF THIS APPLICATION MUST BE COMPLETED, EVEN IF YOU INCLUDE A SEPARATE RESUME.

Position Preference Check preference(s) Grade(s) Subject(s) ☐ Elementary ☐ Middle School Grade(s) Subject(s) ☐ High School Grade(s) Subject(s) ☐ Full Time ☐ Substitute Date Available **Personal Information** Permanent Address City ______ State _____ Zip Code _____ Telephone (home)_____ (cell)_____ Email address _____ Present Address City _____ State ____ Zip Code _____ Telephone (home)_____ (cell)_____

EDUCATIONAL PREPARATION							Diploma/
Name and Location of Institution	Nature of Studies						Degree
High School	Major Minor						
College							
Graduate (degree received or number of credit hours completed)							
		Gradu	ate H	ours E	Beyond	l Highest Degr	ee
					J	2	
Scholastic honors	1)						
(College and High Sch	001)						
Circle Scholastic average of all college works	Α	A-	В	B-	C	C-	
Circle Scholastic average in major field :	A	A-	В	В-	С	C-	
CERTIFICATION							
NEW YORK STATE CERTIFICATION(S)	□ YES	$S \Box$	NO		Pendin	ıg	
	tification	ı Nun	nber a	ınd Da	ite		
If Yes, enclose copy of all certificates If no or pending, explain		Hav	e vou	ever	had ce	rtification deni	ed revoked or
	Have you ever had certification denied, revoked, or suspended? ☐ YES If yes, explain ☐ NO						

ANTI-DISCRIMINATION POLICY

The District does not discriminate in employment or in the education programs and activities which it operates on the basis of race, color, national origin, religion, marital status, military status, sex, age, weight, sexual orientation, gender identity, ethnic group, religious practice, disability or predisposing genetic characteristic in violation of Title IX of the Education Amendments of 1972, Title VI and VII of the Civil Rights Act of 1964, 42 U.S.C. 12111 et. seq. known as the Americans With Disabilities Act or § 504 of the Rehabilitation Act of 1973 and New York State Human Rights Law, and The Boy Scouts of America Equal Access Act of 2001.

EDUCATIONAL EXPERIENCES

List in chronological order with most current experience. Include student teaching, if done within the past two years.

Name & Location of Institution	Specific Nature of Position	Total Years	Annual Salary						
Total Years of Full-Time Teaching F	xperience in Last Ten Years								
		<u> </u>							
RELATED PROFESSIONAL EXPERIENCE Professional (educational travel, lectures, addresses, publications, professional memberships, special programs, community service)									
	71	1 1 0	,						
OTHER WORK EXPERIENCE (Business)	ness, summer occupations)								
Firm (give address and phone number	Nature of Work								
LIST ACTIVITIES YOU CAN SPONSOR OR COACH (Also include hobbies and interests)									

REFERENCES (Give names of four persons who have observed your work as a teacher or a student teacher

Name	Official Position	Present Address	Telephone
			-
			-
			-
			-
PLEASE CHEC	CK APPROPRIATE BOX	•	
□ YES □ NO	•	by a NYS Public School? If yes, School Dist	rict
□ YES □ NO		n appointment to tenure? If yes, School Distric	et
□ YES □ NO	3. Have you ever had your empl resignation or other action? In	oyment in another school district terminated, f so, give details.	either by
□ YES □ NO	4. Do you have any commitmer with us?	nts to another employer which might affect yo	ur employment
□ YES □ NO		to our contacting your present or former emp.	
□ YES □ NO		g to coach an athletic team or advise an extrac	urricular
□ YES □ NO 7		with our District within the last twelve month	
	PLEASE READ CAREFUL	LY – APPLICANT'S CERTIFICATION	
understand that if er that the Newark Val hereby release from information given is that all information g	nployed, falsified statements on this appley Central School District will be may any liability anyone giving information relevant to the duties for which I have	byment application are true and complete to the best of pplication shall be considered sufficient cause for distriction an extensive inquiry regarding my background an regarding me (whether specified in my application of applied. If requested, I will sign individual releases, on will be the property of the School District and will in	missal. I understand and experience and I or not) so long as the I further understand
Date	Sign	ature of Applicant	

Thank you for completing this application form and for your interest in employment with us. Your application will remain active for one year.