

HUMAN RESOURCES OFFICE
 21 PAGE AVENUE
 COHOES, NY 12047
 518-237-0100 EXT. 2359
 518-233-1878 FAX



APPLICATION FOR EMPLOYMENT – INSTRUCTIONAL

(All Teachers, School Administrators and Teaching Assistants must apply on-line using www.olasjobs.org/capital and will be required to complete this application at time of interview.)

PLEASE PRINT

NAME: (LAST) _____ (FIRST) _____ (MIDDLE) _____

PRESENT ADDRESS – STREET AND NUMBER _____

CITY AND STATE _____ ZIP CODE _____

PERMANENT ADDRESS (if different) _____

E-MAIL ADDRESS _____ CELL PHONE _____

HOME PHONE _____ WORK PHONE _____

POSITION APPLIED FOR _____ VACANCY # (if applicable) _____

How did you hear about this position? _____

Have you ever worked for the Cohoes City School District before? Yes No

If yes, where? _____ When? _____

Are you currently a member of a NYS Retirement System? Yes No If yes, which system TRS ERS and number? _____

SCHOOLS ATTENDED: HIGH SCHOOL, UNDERGRADUATE SCHOOL, GRADUATE SCHOOL, OTHER					
NAME AND LOCATION	YEARS ATTENDED		DIPLOMA, DEGREE OR GED	COMPLETED YES/NO	FIELDS OF STUDY
	FROM	TO			

WORK EXPERIENCE				
EMPLOYER AND LOCATION	YEARS EMPLOYED		TYPE OF POSITION (Full, Part-Time, Seasonal, Temporary)	REASON FOR LEAVING
	FROM	TO		

CERTIFICATION/PROFESSIONAL LICENSE INFORMATION				
<p>It is the applicant's responsibility to have official college transcripts, placement folder (if available) <u>or</u> a minimum of three written references <u>and</u> a copy of any certification or licensure issued by the State of New York forwarded to the Human Resources Office.</p>				
<p>A. I hereby certify that I hold a teaching certificate issued by the University of the State of New York as follows:</p>				
Area of Certification	Form (e.g., initial, permanent, professional, provisional)	Date Issued	Expiration Date	Active or Inactive

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

- 1. Submitted to and approved by the NYS Department of Education – Certificate forthcoming
Date filed with NYS _____
- 2. Application filed, decision pending – Date filed with SED _____
- 3. Application not filed

TENURE STATUS (CERTIFIED EMPLOYEES ONLY)

Did you ever receive tenure status in a public school district or BOCES in New York State? Yes No

If yes, Official Tenure Area(s) _____ Effective Date(s) _____

Name(s), address(es) and phone number(s) of school district(s)/BOCES where tenure status was granted:

NAME (School or Office/Program Area)	ADDRESS	PHONE NUMBER	SCHOOL DIST/ BOCES

Did you serve a probationary period? Yes No If yes, how long? _____

NOTE: Upon appointment of a probationary teaching position within the Cohoes City School District, documentation of the above tenured position(s) and an APPR rating in your final year of service must be provided to Human Resources, according to Education Law 3012-c and/or Education Law 3012-d.

REFERENCES

Please list at least three professional references; two must be direct supervisors who can provide information on your qualifications for this position.

NAME	POSITION/TITLE	ADDRESS	PHONE

PLEASE ANSWER THE REQUIRED LEGAL QUESTIONS

- Are you a citizen of the United States of America? Yes No
- Have you ever been convicted of a crime? Yes No
- Have you ever been dismissed or asked to resign from a position? Yes No
- Have you ever resigned in lieu of facing termination, discipline and/or charges of misconduct? Yes No

- 5. Are any criminal charges currently pending against you? Yes No
- 6. Are you being investigated or under discipline at your current job? Yes No

If yes to 2, 3, 4 and/or 5 above, please explain below and attach additional sheets as necessary: _____

- 7. Have you ever been dishonorably discharged from military duty? Yes No
- 8. Has your teaching certification ever been terminated or temporarily suspended pursuant to a Part 83 hearing? Yes No
- 9. Are you legally eligible for employment in this country? Yes No
- 10. Have you ever been fingerprinted by the NYS Education Department? Yes No

The Cohoes City School District does not discriminate on the basis of race, color, national origin, sex, disability or age in its programs, activities, employment and admissions and provides equal access to the Boy Scouts and other designated youth groups. The following person has been designated to handle inquiries regarding the nondiscrimination policies: Human Resources, at tgarceau@cohoes.org, 518-237-0100 ext. 2359, 21 Page Avenue Cohoes, NY 12047. Inquiries concerning the application of the Cohoes City School District nondiscrimination policies may also be referred to the Office for Civil Rights, U.S. Department of Education, 32 Old Slip, 26th Floor, New York, NY 10005-2500, telephone: 646-428-3900, FAX: 646-428-3843, TDD: 800-877-8339, email: OCR.NewYork@ed.gov

Please submit this application along with your resume and cover letter and forward copies of your certification and transcript or placement folder. Also, please attach any additional experience or background information that will qualify you for this position.

COHOES CITY SCHOOL DISTRICT
 Human Resources Office
 21 Page Avenue, Cohoes, NY 12047 ♦ Phone: 518-237-0100 ext. 2359 ♦ Fax: 518-233-1878

AFFIRMATION: I affirm that all statements made on this form, including any accompanying papers, are true, accurate and complete to the best of my knowledge under penalty of perjury. I understand that false or incorrect information in this application is grounds for disqualification from further consideration or for subsequent dismissal from employment if I am hired. I voluntarily give the Cohoes City School District the right to investigate my past employment and all statements contained in this application.

AUTHORIZATION: I hereby authorize the Cohoes City School District to investigate references from my previous or current employers and all statements contained in this application.

Signature of Affirmation and Authorization

Date _____