

# Duanesburg

CENTRAL SCHOOL DISTRICT

133 School Drive / Delanson, New York 12053



## Non-Instructional Application

To be a socially responsible school community where learning and the pursuit of excellence are valued.

### Personal Information

Position Desired \_\_\_\_\_ Date of application: \_\_\_\_\_

Last Name \_\_\_\_\_ First \_\_\_\_\_ Middle \_\_\_\_\_

Present Address \_\_\_\_\_ City, State, Zip \_\_\_\_\_

Permanent Address \_\_\_\_\_ City, State, Zip \_\_\_\_\_

Day Phone \_\_\_\_\_ Evening Phone \_\_\_\_\_

Soc. Sec. # \_\_\_\_\_ E-mail Address \_\_\_\_\_

Length of residency in Schenectady County? \_\_\_\_\_

Have you been previously employed by the Duanesburg Central School District?

Yes  No

If you answered yes, please indicate when? \_\_\_\_\_

### Education

#### School & Location

#### Graduated

#### Course/Major

High School \_\_\_\_\_  Yes  No \_\_\_\_\_

Undergraduate \_\_\_\_\_  Yes  No \_\_\_\_\_

Graduate \_\_\_\_\_  Yes  No \_\_\_\_\_

Trade or Business \_\_\_\_\_  Yes  No \_\_\_\_\_

High School Equivalency Diploma?  Yes  No Number and Date \_\_\_\_\_

### Employment History

List the last three employers in chronological order beginning with your present position or last employer. May we contact those under whom you have worked or are still working?  Yes  No

Employer Name, Address & Phone Number	Position	Dates Employed	Reason for Leaving
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## References

Please list at least three professional references.

Present Address

Current Phone Number

Name _____	_____	_____
Title _____		
Name _____	_____	_____
Title _____		
Name _____	_____	_____
Title _____		

## Health and Physical Conditions

Do you have any impairments: physical, mental or medical, which could interfere with your ability to perform your job?

Yes  No

If you answered yes, please describe the condition and provide the name and address of the professional who has treated or is treating you: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

## Military Service

Have you ever served in the Armed Forces for the United States?  Yes  No

Did you enter service from New York State?  Yes  No

Date of entry into service \_\_\_\_\_ Service Serial Number \_\_\_\_\_

Are you a disabled veteran?  Yes  No Are you an exempt volunteer fireman?  Yes  No

Have you ever taken a civil service examination?  Yes  No Title \_\_\_\_\_ Date \_\_\_\_\_

## General Information

Are you a citizen of the United States?  Yes  No

\*Have you ever been convicted of a crime?  Yes  No

\*Have you ever been dismissed or asked to resign from any position?  Yes  No

\*If you answered yes to either of the last two questions, please explain \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

I hereby affirm that the statements made in this application are true to the best of my knowledge and belief.

SIGNED \_\_\_\_\_ DATE \_\_\_\_\_

*Applicant my attach a separate sheet of paper to provide additional information relative to your application for this position.*

*Applicants who are selected will be subject to fingerprint supported criminal history background check in accordance with SAVE Legislation effective July 1, 2001.*

*An Equal Opportunity/Affirmative Action Employer. The Duanesburg Central School District does not discriminate on the basis of race, color, creed, national origin, gender, age, disability, marital or parental status in any of its activities including employment and education programs.*

*Please return completed application and resume to the Duanesburg Central Office, 133 School Drive, Delanson, NY 12053.  
Phone: 518-895-2279 Fax: 518-895-2626*