Minerva Central School

Candice L. Husson - Superintendent Cortney McCauliffe - Business Manager



(PLEASE PRINT)

Position Applied For				Date of Appli	cation	
How Did You Learn About Us?						
□ Advertisement	Friend	🗌 Walk-	In			
Employment Agency	Relative	Other				
Last Name	First Name		Ν	Middle Name		
Address Number Street	City	Sta	ate	Zip Co	le	
Telephone Number(s)				Social Securi	ty Number	
If you are less than 18 years of ag	ge, can you provide required proof	of your				
eligibility to work?				Yes	🗌 No	
Have you ever filed an applicatio	n with us before?			Yes	🗌 No	
	If Yes	, give date	e			
Have you ever been employed wi	th us before?			Yes	🗌 No	
	If Yes	, give date	e			
Are you currently employed?				Yes	🗌 No	
May we contact your present emp Are you prevented from lawfully	ployer? becoming employed in this countr	w because		Yes	🗌 No	
of Visa or Immigration Status?	becoming employed in this count	y because	/			
Proof of citizenship or immigra	ation status will be required upon employ	ment		Yes	🗌 No	
On what date would you be availa	able to work?					
Are you available to work:	\Box Full Time \Box P	art Time		Shift Work	Tem	porary
Are you currently on "lay-off" sta	atus and subject to recall?			Yes	🗌 No	
Can you travel if a job requires it				Yes	🗌 No	
Have you been convicted of a fele Conviction will not necessarily	ony within the last 7 years? disqualify an applicant from employmer	ıt.		Yes	🗌 No	
If Yes, please explain						

WE ARE AN EQUAL OPPORTUNITY EMPLOYER

Education

		Elem	entary	y Scho	ool		High	School			Jnder llege /		ate ersity		Grac Profe	luate ssion	
School Name / Location																	
Years Completed	4	5	6	7	8	9	10	11	12	1	2	3	4	1	2	3	4
Diploma / Degree							•				•						
Describe Course of Study																	
Describe any specialized training, apprenticeship, skills and extra-curricular activities																	
Describe any honors you have received																	
State any additional information you feel may be helpful to us in considering your application																	

Indicate any foreign languages you can speak, read and / or write							
	FLUENT	GOOD	FAIR				
SPEAK							
READ							
WRITE							

List profession, trade, business or civic activities and offices held:

You may exclude memberships which would reveal gender, race, religion	national origin, age,	ancestry, or handicap or other
protected status:		

References

Give name, address and telephone number of three references that are not related to you and are not previous employers.

1	•
2	

3.

Have you ever	had any job-related	training in the Unit	ed States Military?

🗌 Yes 🗌 No

If Yes, please describe

Are you physically or otherwise unable to perform the duties of the job for which you are	🗌 Yes 🗌 No
applying?	

Employment Experience

Start with your present or last job. Include any job-related military service assignments and volunteer activities. You may exclude organizations that indicate race, color, religion gender, national origin, handicap or other protected status.

1.	Employer		Dates Er			
			From	То	Work Performed	
	Address					
				-		
	Job Title	Supervisor				
	Reason for Leaving			L		
2.	Employer		Dates Er	nployed		
			From	То	Work Performed	
	Address					
				-		
	Job Title	Supervisor				
	Reason for Leaving			-		
	6					
3.	Employer		Dates Er	nployed		
			From	То	Work Performed	
	Address					
				-		
	Job Title	Supervisor				
	Reason for Leaving			-		
4.	Employer		Dates Er			
	4 11		From	То	Work Performed	
	Address					
				ļ		
	Job Title	Supervisor				
	Reason for Leaving			ľ		
		If you need additional space, please co	ontinue on a separate she	et of paper.		

Special Skills and Qualifications

Summarize special job-related skills and qualifications acquired from employment or other experience.

Please list all current forms of certifications that you now hold.

Certification Area	Date Conferred	Date Expired (if applicable)	<u>State</u>

- I certify that the answers and information given herein are true and complete to the best of my knowledge.
- I authorize the investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision.
- This application for employment shall be considered active for a period of time not to exceed June 30th of the school year of which employment was intended.
- In the event of employment, I understand that false or misleading information given in my application or during the interview process may result in discharge. I understand also, that I am required to keep valid all certifications or licenses associated with my position and that I shall abide by the rules, regulations and policies of the employer.

Signature of Applicant

Date

The Minerva Central School District does not discriminate on the basis of age, color, creed, disability, marital status, veteran status, family status, national origin, race or gender in the educational and/or operational programs and activities which it operates. This policy is in compliance with Title IX of the Educational Amendments of 1972, and all applicable Federal and State Laws and Regulations.

Inquiries concerning this policy may be referred to the Minerva Central School District, c/o Affirmative Actions Officer, P.O. Box 39, Olmstedville, New York 12857.

The Minerva Central School District is an equal opportunity educator and employer.