



EMPLOYMENT APPLICATION (CONTINUED)

EMPLOYMENT HISTORY

Please list your employment history below, beginning with your most recent employer.

1

<input type="text"/>	<input type="text" value="MM/YYYY — MM/YYYY"/>	
▲ Employer	▲ Dates employed	
<input type="text"/>	<input type="text" value="CITY & STATE"/>	<input type="text"/>
▲ Employer's phone	▲ Employer's location	▲ Supervisor's name
▼ Please describe the type of work performed. For teaching positions, please specify grade level, subject, etc.:		
<input type="text"/>		

2

<input type="text"/>	<input type="text" value="MM/YYYY — MM/YYYY"/>	
▲ Employer	▲ Dates employed	
<input type="text"/>	<input type="text" value="CITY & STATE"/>	<input type="text"/>
▲ Employer's phone	▲ Employer's location	▲ Supervisor's name
▼ Please describe the type of work performed. For teaching positions, please specify grade level, subject, etc.:		
<input type="text"/>		

3

<input type="text"/>	<input type="text" value="MM/YYYY — MM/YYYY"/>	
▲ Employer	▲ Dates employed	
<input type="text"/>	<input type="text" value="CITY & STATE"/>	<input type="text"/>
▲ Employer's phone	▲ Employer's location	▲ Supervisor's name
▼ Please describe the type of work performed. For teaching positions, please specify grade level, subject, etc.:		
<input type="text"/>		

4

<input type="text"/>	<input type="text" value="MM/YYYY — MM/YYYY"/>	
▲ Employer	▲ Dates employed	
<input type="text"/>	<input type="text" value="CITY & STATE"/>	<input type="text"/>
▲ Employer's phone	▲ Employer's location	▲ Supervisor's name
▼ Please describe the type of work performed. For teaching positions, please specify grade level, subject, etc.:		
<input type="text"/>		



EMPLOYMENT APPLICATION (CONTINUED)

EMPLOYMENT HISTORY (CONTINUED)

Have you ever been dismissed from a position? Yes No

▼ If yes, please explain:

REFERENCES

Give the names of three individuals who have closely observed your work and who have first-hand knowledge of your character, personality and work habits who may be contacted as references.

1	<input type="text"/>	<input type="text"/>	<input type="text"/>
	▲ Reference name	▲ Reference phone	▲ Reference email
2	<input type="text"/>	<input type="text"/>	<input type="text"/>
	▲ Reference name	▲ Reference phone	▲ Reference email
3	<input type="text"/>	<input type="text"/>	<input type="text"/>
	▲ Reference name	▲ Reference phone	▲ Reference email

FOR INSTRUCTIONAL AND PROFESSIONAL SUPPORT POSITIONS



This section should only be completed by applicants for instructional and professional support positions (teachers, teaching assistants, nurses, psychologists, social workers, guidance counselors and administrators). All other applicants may skip this section and continue to the "SIGNATURE" section on the following page.

Select your current level of NYS certification for the position you are applying to:

None Initial Professional Provisional Permanent

<input type="text"/>	MM/YYYY
▲ Certification number	▲ Date issued

Have you ever been denied an appointment to tenure? No Yes

Have you ever received tenure in any school district or BOCES anywhere in New York? No Yes (complete below)

<input type="text"/>	<input type="text"/>	MM/YYYY
▲ Tenure area	▲ Name of district/BOCES	▲ Tenure date



EMPLOYMENT APPLICATION (CONTINUED)

SIGNATURE

I certify that the information contained in this application is true and correct to the best of my knowledge, and 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 also agree to notify the City School District of Albany of any material changes in the information provided on this application. I hereby consent to have the City School District of Albany contact anyone it deems appropriate to investigate or verify any information I have given or to discuss my background, past performance or suitability for employment.

Further, I hereby authorize my former employer(s), reference(s), and any other individual or organization to provide information solicited by the City School District of Albany, and I hereby release and discharge each of the above, including the City School District of Albany, from any liability of any kind or nature and waive all rights to bring any action for defamation, invasion of privacy or any similar course of action against anyone contacted as a result of what he or she may say about me.

The Commissioner of Education is required by law and regulation to request a fingerprint-supported criminal history record from the Division of Criminal Justice and the Federal Bureau of Investigation. Employment may be offered prior to receipt of finger print clearance. Continued employment is contingent upon clearance from the State Education Department.

▲ Signature

▲ Applicant name (printed)

▲ Date of application

SUBMITTING THIS APPLICATION

Completed applications may be returned by mail or electronically to:

City School District of Albany
Office of Human Resources
1 Academy Park
Albany, NY 12207
(518) 475-6055

humanresources@albany.k12.ny.us

All completed applications should be submitted along with:

- Cover letter
- Current resume

Those applying for instructional and professional support positions (teachers, teaching assistants, nurses, psychologists, social workers, guidance counselors and administrators) should also submit:

- Copy of transcript(s); official transcript will be required if hired
- Copy of NYS certification

AMERICANS WITH DISABILITIES ACT

Reasonable accommodations are given to employees who have disabilities as defined by the Americans with Disabilities Act (ADA). Accommodations are given to assist the employee with performing the essential functions of their job duties that due to their disability they are unable to perform without an accommodation. For more information on reasonable accommodations, please contact us at humanresources@albany.k12.ny.us or (518) 475-6055.

NONDISCRIMINATION NOTICE

The City School District of the City of Albany does not discriminate on the basis of Age, Race, Color, National Origin, Sex, Disability or Marital Status in Employment or any of the educational programs and activities which it offers or operates, as it is required to do by Title VI of the Civil Rights Act of 1964, Title IX of the Educational Amendments of 1972, Section 504 of the Rehabilitation Act of 1973, the Age Discrimination Act of 1975, and the New York State Human Rights Laws.

END OF APPLICATION