CIVIL SERVICE APPLICATION



City School District of Albany

Office of Human Resources | 1 Academy Park | Albany, NY 12207 (518) 475-6055 | humanresources@albany.k12.ny.us

Date								
Position applying for				Ye	Years of experience in this work			
Personal info	rmatic	on						
Please print.								
Last name			First name					Middle initial
Present address			City			State		Zip
Casial Casumity assessed as		Dhana numhar		Cm oil				
Social Security number		Phone number		Email				
Are you eligible to work	in the Uni	ited States?	Yes		No			
, ,			_					
Please indicate any spe	cial accor	mmodations required	d for you to perf	orm the	duties for	this posit	ion ap	plying for:
Education								
Luucation								
	School name/location				Dates attended (month/year)		Deg	ree/diploma/certificate
High school								
College (undergraduate)								
College (graduate)								
Other programs/sessions								

Current employme	nt						
Last employer		E	Employer's address				
Employer's phone number	visor		Start date	End date			
Type of work performed:							
Reason for leaving:							
Provious work ove	orionoo						
Previous work exp	erience						
Employer	Start date	End date	Type of work	Name of	Name of supervisor		
Places list other skills relevant t	o the position appl	ving for:					
Please list other skills relevant to	o the position appr	ying for.					
Have you ever been dismissed	from a position? If	ves, pleas	e explain. Yes No	П			
,		, , ,	_	_			
References							
Give the names of three persons w personality and work habits who ma			vork and who have first-hand k	nowledge of your cl	haracter,		
Name			Address (Street, city, state, zip)	P	hone number		

Have you had any experience working with children? If yes,	please explain.	Yes No
Applicant's statement		
Please give any additional information which you think might be he seeking employment with the City School District of Albany.	elpful to us in evaluatir	ng your application, and state your reason for
I certify that the information contained in this application is true and incorrect information in this application is grounds for disqualification employment if I am hired.		
I also agree to notify the City School District of Albany of any mate consent to have the City School District of Albany contact anyone given or to discuss my background, past performance, or suitability	it deems appropriate t	
Further, I hereby authorize my former employer(s), reference(s) are by the City School District of Albany, and hereby release and disch from any liability of any kind or nature and waive all rights to bring of action against anyone contacted as a result of what he or she me	narge each of the above any action for defama	ve, including the City School District of Albany,
Signature of applicant	Date	

Applications may be returned to:

City School District of Albany Office of Human Resources 1 Academy Park Albany, NY 12207 (518) 475-6055 humanresources@albany.k12.ny.us



The City School District of the City of Albany, New York, 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.