

EDUCATION

NAME OF SCHOOL AND LOCATION (INCLUDE HIGH SCHOOL, COLLEGE, GRADUATE WORK & SUMMER SESSIONS, MOST RECENT FIRST)	GRADUATED YES / NO	DEGREE/ DIPLOMA	MAJOR SUBJECT	SEM. HOURS/ CRED.
	<input type="checkbox"/> Yes <input type="checkbox"/> No			
	<input type="checkbox"/> Yes <input type="checkbox"/> No			
	<input type="checkbox"/> Yes <input type="checkbox"/> No			
	<input type="checkbox"/> Yes <input type="checkbox"/> No			
	<input type="checkbox"/> Yes <input type="checkbox"/> No			

RELATED PROFESSIONAL EXPERIENCE

DATES		NAME OF SCHOOL DISTRICT AND LOCATION (IN ORDER)	NATURE OF WORK (GRADE LEVEL, SUBJECT, ETC. INDICATE IF SUBSTITUTE TEACHING, PRACTICE TEACHING, FULL TIME OR PART TIME POSITION.)
From	To		

OTHER WORK EXPERIENCE

DATES		NAME OF EMPLOYER	NATURE OF WORK
From	To		

CERTIFICATION

CERTIFICATION AREA	TYPE OF CERTIFICATION (I.E., PROVISIONAL, PERMANENT INITIAL, PROFESSIONAL)	CERTIFICATE NUMBER	EFFECTIVE DATE	EXPIRATION DATE	STATE ISSUED BY

ADDITIONAL INFORMATION

Are you a member of the N.Y.S. Retirement System?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Are you a citizen of the United States?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Have you received tenure in New York State?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Have you been fingerprinted through the NYS Education Department?	<input type="checkbox"/> Yes <input type="checkbox"/> No

Have you ever resigned from a position rather than face disciplinary action?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Has any disciplinary action been brought against you which resulted in your being discharged from employment?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Did you receive a discharge from the Armed Forces of the United States which was other than "Honorable" or which was issued under other than honorable circumstances?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Have you ever been convicted of any crime (felony or misdemeanor other than minor traffic violations)?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Have you ever had a teaching credential revoked, suspended or annulled?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Have you been found guilty of 3020a charges?	<input type="checkbox"/> Yes <input type="checkbox"/> No
<i>If you answered YES to the above questions, please provide an explanation for your response on a separate sheet of paper and attach to this application.</i>	

Which sports or extra-curricular activities are you able to coach or direct successfully? Please List: _____	

REFERENCES

These should be persons qualified to give any information to show your fitness for the position you seek.

LIST REFERENCES: (3 PROFESSIONAL AND 2 PERSONAL)

NAME	ADDRESS	EMAIL	TELEPHONE	POSITION

I certify that the facts set forth in the above employment application are true and complete to the best of my knowledge. I further acknowledge that any falsification or omission will be sufficient cause for disqualification or dismissal if employed, regardless of what or when discovered.

Signature: _____ Date: _____

Huntington UFSD Non-Discrimination Notice

The Huntington UFSD does not discriminate on the basis of age, religion, creed, ethnic origin, marital status, race, color, sex, veteran status, disability or handicap. This policy on non-discrimination includes the recruitment, hiring and advancement of employees' salaries, pay and other benefits.