

WALTON CENTRAL SCHOOL DISTRICT

47 - 49 STOCKTON AVE
WALTON, N.Y. 13856-1493
(607) 865-4116

42 - 66 NORTH STREET
WALTON, N.Y. 13856-1300
(607) 865-5220

TEACHER APPLICATION

Title of Position(s) for which you are applying _____

We are an equal opportunity employer. The school district does not discriminate in employment or in the education programs and activities which it operates on the basis of sex, race, or handicap in violation of Title VI of the Civil Rights Act of 1964, Title IX of the Education Amendment of 1972, or Section 504 of the Rehabilitation Act of 1973.

A clear understanding of your background and work history will aid us in the possibility of placing you in a position that best meets your qualifications.

DIRECTIONS: Please print or type. Answer ALL questions; write NO or NONE where applicable.
Please spell out all names; DO NOT use initials or abbreviations.

Name _____ Soc. Sec. No. _____
Last First Middle

Present Address _____ Phone _____
Street Area Code

City State Zip Code

Permanent Address _____ Phone _____
Street Area Code

City State Zip Code

Were you hired by a public school district on or after July 1, 2001? _____

Teaching and/or Administrative Certificates:	Title	No.	Expiration	Valid Field
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Are you eligible for New York State Certification? _____ If no degree or teaching certificate, how and when will you complete requirements? _____

Present Position _____ Present Salary _____ Expected Salary _____

Are you now under contract? _____ Expiration Date _____ Availability Date _____

What extracurricular activities are you willing to help with?

PROFESSIONAL PREPARATION

Professional Tests Passed: Answer **YES** or **NO** to all that apply.

Have you completed a two clock hour course in Child Abuse Recognition and Reporting? _____ Yes _____ No

NTE: Communication Skills _____
General Knowledge _____
Professional Knowledge _____

NYS Teacher Certification Exam Program (NYSTCE): LAST _____ATS-W _____

List all colleges/universities attended for UNDERGRADUATE study, in chronological order, beginning with first undergraduate study. Include institutions attended even though no degree was earned.

Institution and Location	Field	Hours	Degree

List all colleges/universities attended or attending for GRADUATE study, in chronological order, beginning with first graduate study. Include institutions attended even though no degree was earned.

Institution and Location	Field	Hours	Degree/Credit Hours Completed

List other educational preparation pertinent to the position(s) for which you are applying (i.e., institutes, seminars, or training programs). _____

List any applicable awards, honors, or publications. _____

TEACHING EXPERIENCE

PLEASE INCLUDE STUDENT TEACHING:

School & Location

Position

Tenure Granted

PLEASE GIVE BRIEF EXPLANATION OF REASON FOR LEAVING LAST EMPLOYMENT:

OTHER PERTINENT WORK EXPERIENCE:

Employer

Type of Work

Dates of Employment

PERSONAL DATA

PLEASE FILL IN ANY DATA YOU CONSIDER PERTINENT:

REFERENCES

List four (4) individuals having personal knowledge of your professional training, abilities, experience.

<u>Name</u>	<u>Title</u>	<u>Address</u>	<u>Phone #</u>
1. _____	_____	_____	_____
2. _____	_____	_____	_____
3. _____	_____	_____	_____
4. _____	_____	_____	_____

Personnel Folder may be secured from: (name and address) _____

PLEASE LIST THREE (3) ALTERNATE DATES YOU CAN COME FOR A PERSONAL INTERVIEW:

1. _____ 2. _____ 3. _____

NOTES: In your own handwriting, please add any comments that will assist us in making a decision concerning your application.

Have you ever been convicted of a crime? _____ If yes, give details. _____

CANDIDATE CHECK LIST

____ Application	____ Letter of Interest	____ Official College Transcript(s)
____ Letters of Reference	____ Resume	____ Writing Sample

PLEASE INCLUDE ALL OF THE ABOVE WITH THE APPLICATION

I understand that Walton Central School District will be making an extensive inquiry regarding my background and experience, and I hereby release from any liability anyone giving information regarding me (whether specified in my application or not) so long as the information given is relevant to the duties for which I have applied. If requested, I will sign individual releases. I further understand that all information gathered by you regarding my application will be the property of the School District and will not be released to me unless required by federal or state statutes or regulations.

Date Signature of Applicant

