



Jamestown Public Schools

Application for Employment

Department of Human Resources

197 Martin Road, Jamestown, NY 14701
Phone: 716-483-4350 Fax: 716-483-4289

Name _____ Social Security No. _____

Current Address _____
Street City State and Zip Code

Current Phone Number _____ Email Address _____

POSITION(S) DESIRED (check all that apply)

Full-Time Part-Time Substitute Temporary/Summer Help Any/All

Teacher (FULL - TIME) (Proof of, or application for, certification MUST be attached for FT teaching consideration)

Grade Level(s) Desired: Pre-School Grades K-4 Grades 5-8 Grades 9-12 Grades K-12
Type of Certification: Initial Conditional Provisional Professional Permanent
Area(s) of Certification: _____ Certification in which state(s)? _____
If previously tenured in New York State, specify location(s) and approximate date(s): _____
Approximate years full-time teaching experience: 0-2 3-5 6-9 10+

Teacher (SUBSTITUTE) (Teacher certification desired, but not required)

Certifications status: Certified Previous Certified Non-Certified
Grade Level(s) Desired: Grades K-4 Grades 5-8 Grades 9-12 Any/All
Areas in which you are willing to work:
Special Education Mathematics English Art Music Technology
Languages Sciences Social/Global Studies Other (specify content area) _____

Administrative Asst Principal Principal Coordinator Director Other

Location or specific position/area for which you are applying: _____
Certifications: SAS SDA None

Support

Teacher Aide (paraprofessional) Clerical Secretary Nurse Other _____
Computer Services Custodian Maintenance Food Service Bus Driver Bus Monitor

Other position not listed above: (specify job title or expected duties) _____

PERSONAL INFORMATION CHECKLIST

Have you worked for the district previously? No Yes If yes, when (approx) _____
When are you available: For an interview _____ To begin employment _____
Highest level of education? Some school High School GED Some college Technical training
Two-year college graduate Four-Year college graduate Some graduate school Graduate school completed
Do you have a valid driver's license? No Yes Type _____ (required for some positions)
Are you over 18 years old? No Yes (if no, you must provide valid working papers to be considered for employment)
Can you provide proof you are legally able to be employed in the United States? No Yes
Have you ever been convicted of a crime? No Yes (if yes, please describe in detail below)
(per New York State law, answering yes may not be an automatic disqualification)

Are you fluent in a language other than English? No Yes Which language(s) _____

List any special skills, talents, awards, and/or certifications that you believe relate positively to your ability to perform the position for which you have applied: _____

UNDERGRADUATE EDUCATION (list in chronological order)

Name and Location of School (High School, Trade School, Community or other College)	No. of Years or Credits	Major	Minor	Degree or Certificate

GRADUATE EDUCATION (list in chronological order)

Name and Location of College	Major Specialization	No. of Credits	Degree

WORK EXPERIENCE (List most recent first. Attach additional pages if necessary. List student teaching/internships on next page)

Dates of Employment: From: _____ To: _____ Annual/Hourly Wage: _____
Company/School Name: _____
Address: _____ Phone: _____
Name of Supervisor: _____
Job Title & Description of Duties: _____

Reason for Leaving: _____

Dates of Employment: From: _____ To: _____ Annual/Hourly Wage: _____
Company/School Name: _____
Address: _____ Phone: _____
Name of Supervisor: _____
Job Title & Description of Duties: _____

Reason for Leaving: _____

Dates of Employment: From: _____ To: _____ Annual/Hourly Wage: _____
Company/School Name: _____
Address: _____ Phone: _____
Name of Supervisor: _____
Job Title & Description of Duties: _____

Reason for Leaving: _____

References (Include Name, COMPLETE Address, and Phone Number)

List below 3 personal references, who are not relatives, who can attest to your character and reputation.

Name	Address	Phone

We will contact the supervisor(s) you have listed above to ask for references regarding your work behavior. Please specify in the box below if there are any you do not want contacted and state the reason.

DO NOT CONTACT: _____
for the following reason: _____

GENERAL COMMENTS (optional)

CERTIFICATION AND AUTORIZATION OF RELEASE

You MUST READ & INTIAL to acknowledge your understanding of each paragraph below.

Certification and Verification:

Applicant Initials

I certify and verify that the answers given by me to the interviewers, the references I have provided for verification, and all the information contained on this application form as well as on resumes and attachments are complete, true, and accurate to the best of my knowledge and belief.

False Statements Prohibition:

Applicant Initials

I understand that any false information, omissions, or misrepresentations of fact in any of the above-referenced information may result in rejection of my application or discharge at any time during my employment.

Authorization to District

Applicant Initials

I hereby authorize the Jamestown Public School District to verify any and all information including, but not limited to, past and present employment, character, education, military service, criminal record, and Department of Motor Vehicle records, and to ascertain any and all information.

Note: A criminal conviction may not be an automatic disqualification.

Authorization to Release Information and References:

Applicant Initials

I hereby authorize all persons, educational institutions, former employers, companies, individuals, governments, and law present employment, character, education, military service, criminal record, and Department of Motor Vehicle records, and to enforcement agencies to release any and all information concerning my past and my background.

Waiver of Liability:

Applicant Initials

I hereby release and absolve for any liability, for any damages whatsoever, any and all persons, educational institutions, former employers, companies, individuals, governments, and law enforcement agencies for their responses in furnishing any and all information.

Validity:

Applicant Initials

This authorization shall be valid for one year from the date of my signature and shall be equally valid for a duplicated copy of this page (as the original will be retained by the Human Resources Office).

Signature

Date

The Jamestown Public School District is an Equal Opportunity Employer and does not discriminate against any protected class in the provision of services or in its employment practices. If you feel you have not been treated fairly or require any special accomodation in the application process because of your race, color, national origin, sex, disability, age, or veteran status, contact the Director of Human Resources who is designated as the District Affirmative Action Officer for Title IX and Section 504 compliance at 716-483-4350