



Charter School for Applied Technologies
2303 Kenmore Avenue
Buffalo, New York 14207
716-876-7505
716-876-9758
www.csat-k12.org

Application for Professional Employment

Date _____

POSITION BEING APPLIED FOR:

- Full time teaching
- Substitute teaching
- Administration

Grade Level Preference _____ Subject/Area _____

Date available for employment _____

PERSONAL INFORMATION:

Name _____
Last First Middle

Present Address _____
Number & Street City State Zip code

Alternate Address _____
Number & Street City State Zip code

Phone Number _____ Alternate Phone _____

Social Security Number ____ - ____ - ____

PERSONAL BACKGROUND HISTORY:

* Have you ever been convicted of a crime, excluding minor traffic offenses? Yes No

If yes state when, where, and the nature of such conviction. Conviction of an offense is not an automatic bar to employment. All circumstances will be considered, including the nature of the crime and length of time since conviction.

* Are any criminal charges or proceedings pending against you? Yes No
(If YES to either or both of the above, please explain on a separate sheet)

* Can you perform the essential functions of the position for which you are applying with or without reasonable accommodation? Yes No

* Are you a citizen of the USA? Yes No

*If NO, do you have legal papers necessary to remain and work in the United States? Yes No

* Have you ever served in the Armed forces of the United States? Yes No

* If YES, did you receive a dishonorable discharge? (If YES, dishonorable discharge is not an absolute bar to employment and other factors will affect a final decision.) Yes No

- List any persons currently serving on our Board or working for us who are related to you

CERTIFICATION/PROFESSIONAL:

I hold the New York State Teaching/Administrative Certificates Described Below:

Type	Area	Exp. Date
-----	-----	-----
-----	-----	-----
-----	-----	-----

* If you do not hold a New York State Teaching Certificate, have you made an application for one? _____ Yes No

* If you are certified in another state please describe

- Are you a member of the NYS Teacher's retirement system?
Yes MEMBERSHIP NUMBER _____ No

- If not do you wish to join? Yes No
- If you do, please fill out the application form provided.

Educational Preparation:

Name and Location of School	Major/Minor	Did you graduate?
-----	-----	-----
-----	-----	-----

High School

Name and Location of School	Major/Minor	Degree
-----	-----	-----
-----	-----	-----

College (Undergraduate)

Name and Location of School

Major/Minor

Degree

College (Graduate)

Vocational /Technical/Trade

Student Teaching /Internship:

Name and Location of School

Area of Specialization

Cooperating Teacher

1. _____

2. _____

Tenure Status:

Did you ever receive tenure in a public school district in New York State? Yes No If **Yes complete the following:**

Tenure Area _____ Effective date _____

Name and Address of School district where tenure was granted _____

Employment History: (Begin with most recent)

Dates employed From _____ To _____ Salary _____

Employer _____

Address _____

Position Title _____

Immediate Supervisor, title & telephone number _____

Reason for leaving _____

Summarize duties and position _____

May we contact for reference? Yes No

Dates employed From _____ To _____ Salary _____

Employer

Address

Position Title

Immediate Supervisor, title & telephone number

Reason for leaving

Summarize duties and position

May we contact for reference? Yes No

Dates employed From _____ To _____ Salary _____

Employer

Address

Position Title

Immediate Supervisor, title & telephone number

Reason for leaving

Summarize duties and position

May we contact for reference? Yes No

- * Have you ever failed to be re-appointed to any position? Yes No
 - * Have you ever been denied Tenure? Yes No
 - * Have you ever resigned from any employment at the request of any employer to avoid denial of tenure, discharge, or any other disciplinary action? Yes No
 - * Have you been terminated from any employment or asked to resign to avoid termination or discipline? Yes No
 - * Have you ever been employed by this school before? If so please indicate dates
_____ Yes No
-

Applicant Consent to investigate and disclose data:

I, _____ (print name) hereby grant permission to **The Charter School for Applied Technologies**, to contact and investigate my former and current employers, and all other pertinent parties, including but not limited to educational institutions where I enrolled to fully investigate my background.

My signature below authorizes the school to conduct a background investigation and authorizes release of information in connection with my application for employment. This investigation may include such information as criminal convictions, driving records, previous employers and education institutions, personal references, professional information, and without limitations hereby releases the school and reference source from any liability in connection with its release or use.

I hereby affirm that the information set forth in this application is complete, accurate and true to the best of my knowledge. I further affirm that I have read the completed application of all 6 pages and have not withheld any information or response to any questions. I understand and agree that any misrepresentation or omission of fact on this application or during the interview process, regardless of when it is discovered, may result in the refusal of employment, or if I have already been employed, constitute cause for my immediate termination. References and personal information which became part of this record are to be regarded as confidential and will not be revealed to me.

I hereby indemnify, release and forever discharge and hold The Charter School for Applied Technologies and its officers, agents, and employees, as well as all third parties supplying such information, harmless from any and all claims, demands, judgment and legal fees arising out of or in connection with this investigation, the results, or any lawful use of the results or disclosure thereto.

If requested by the District in connection with its application, I will take a physical examination. I agree that the examining authority may disclose the findings of these examinations to the District and that my initial employment is conditioned upon meeting the requirements of that examination as established by the District.

I will be able, if hired, to certify that I am authorized in work in the United States of America and understand in accordance with the Immigration Reform and Control Act that I will be required to provide timely documentation of identity and employment eligibility.

In the event that I am employed, I agree to conform to and follow all the districts rules and regulations.

Pursuant to New York State Law, I agree to sign any additional forms of consent and/or to undergo any additional procedures required by District, NYSED, NYS DCJS or the FBI to effectuate a criminal record background check. I also understand that I must forward two (2) copies of my fingerprints as well as the required fee to NYSED and any other fees required to so effectuate this process.

This employment application may not be kept on file for more than six (6) months from the date of submission.

Signature of Applicant

Printed Name of Applicant

Date

DO NOT INCLUDE THIS PAGE WITH COMPLETED APPLICATION – FOR APPLICANT’S INFORMATION ONLY

List of required attachments to this application

1. copies of any and all certifications
2. college placement files containing three confidential references and letters of recommendations.
3. resume

Required Items – Upon offer of employment

1. two copies of fingerprint cards
2. required bank draft, postal money order or certified check payable to “New York State Education Department” for criminal records check
3. required documents for Federal I-9 Form

Social Security Number Notice:

Failure to submit social security on this form will not prohibit employment consideration. Social Security Number may be required on other forms prior to employment. If and when a candidate is given further consideration, the District will use potential candidate’s Social Security Number to check status of professional certification and a criminal records check as part of the hiring process.