Boquet Valley Central School District District Office PO Box 158. 7530 Court St Elizabethtown, NY 12932

www.boquetvalleycsd.org

Application for TEACHER POSITIONS Boquet Valley Central School District

The **Boquet Valley** Central School District is an equal opportunity/affirmative action employer

INSTRUCTIONS FOR APPLYING: Please send a personal letter outlining your qualifications, along with this completed signed application form including a minimum of five current professional references; a current résumé; three current letters of recommendation and copy of your NYS teaching certificate. Please forward all documents to the following:

Superintendent Boquet Valley CSD PO Box 158. 7530 Court St Elizabethtown, NY 12932 (518) 873-6371 (518) 873-9552 fax

APPLYING FOR POSITION OF:

Applicants are asked not to contact members of the Board of Education except as they may be requested to do so.

PERSONAL INFORMATION

First	Middle
e any additional information regarding maio	len name, change of name)
City/State/Zip code	Telephone Number
Job Title	
Business Number	
in the U.S.? Yes No	
? Yes No If yes, please explain	
	e any additional information regarding main City/State/Zip code Job Title Business Number in the U.S.? Yes No

CERTIFICATION (List All Certificates)				
TITLE OF CERTIFICATE	CERTIFICATE NUMBER	VALID IN STATE OF	DATE ISSUED	DATE EXPIRES

PROFESSIONAL PREPARATION

Undergraduate					
INSTITUTION	LOCATION	DATES	NATURE OF STUDIES Major/Minor	DIPLOMA/DEGREE	DATE GRANTED

Graduate		-			
INSTITUTION	LOCATION	DATES	NATURE OF STUDIES Major/Minor	DIPLOMA/DEGREE	DATE GRANTED

Summarize graduate work beyond the highest earned or graduate work not leading to a degree

Summarize graduate work	Summarize graduate work beyond the highest carned of graduate work not reduing to a degree					
INSTITUTION	LOCATION	DATES	INDICATE MAJOR CONCENTRATIONS	CREDITS	ADDITIONAL INFORMATION	
SCHOLASTIC HONO	SCHOLASTIC HONORS					
PROFESSIONAL MEN	MBERSHIPS					

RELATED PROFESSIONAL EXPERIENCE

(Educational travel, lectures, addresses, publications, organizational memberships, committee chairs or memberships, participation in educational experiments, innovations, special programs, elective positions held, community and social services, scouting, recreation etc.)

TENURE STATUS

Were you ever granted tenure in a public school district or board of cooperative educational services (BOCES) in New York State? Yes \Box No \Box

If yes, complete: Tenure Area

Effective Date

Name and Address of School District Where Tenure was Granted

If you answer yes to any of the following four questions, please give specifics on a separate sheet:

- Have you ever received a penalty pursuant to Education Law §3020-a or Civil Service Law §75? Yes □ No □
- 2. Have you ever had your certificate revoked? Yes \Box No \Box
- 3. Have you ever received a censure and/or reprimand based on action of the Board of Regents? Yes 🗆 No 🗆
- 4. Have you ever had a contract not renewed? Yes \Box No \Box

WORK EXPERIENCE BASED ON CERTIFICATE/LICENSE					
DATES EMPLOYED	EMPLOYER'S NAME AND ADDRESS	NATURE OF POSITION/SALARY	REASON FOR LEAVING		

	OTHER WORK EXPERIENCE					
DATES EMPLOYED	EMPLOYER'S NAME AND ADDRESS	NATURE OF POSITION/SALARY	REASON FOR LEAVING			

ADDITIONAL INFORMATION

Any additional information you feel would be helpful in the selection process.

REFERENCES					
	List the names of five (5) persons (two of which are not listed in your placement files) who, during the past five (5) years, are knowledgeable as to your educational or other experiences				
NAME	TITLE	ADDRESS	TELEPHONE		

May we refer to your present employer?	Yes	No
May we refer to your previous employer(s)?	Yes	No

INDEMNIFICATION

I hereby certify that the above information, together with any additional information furnished in conjunction with this application, is furnished for the purpose of gaining employment, and is true to the best of my knowledge and belief. I understand that such information shall be the basis of me being considered for employment, and that false statements may result in my application not being considered or my dismissal from future employment.

Authorization is hereby given to Boquet Valley Central School District and their Search Consultant to obtain reference checks from any of the named sources in this application and the sources to release information if requested by Boquet Valley Central School District or their Search Consultant.

I understand that the Search Consultant and/or 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. I understand that the information gathered, in part or whole, may be shared with members of the school district involved in the search process. 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.

The Boquet Valley Central School District, in compliance with Title IX of the Education Amendments of 1972 and Regulation 504 of the Rehabilitation Act 1973, does not discriminate on the basis of race, creed, color, gender, age, national origin, disability, gender identity or expression, genetic information or testing, veteran status, sexual orientation or other protected class per law.

↑ Applicant's Signature

Date