

CANAJOHARIE CENTRAL SCHOOL DISTRICT

Application for Superintendent of Schools



DIRECTIONS

1. Please complete application form and forward it, with your letter of application, to the person listed below. **Do not indicate "see attached vita or materials."**
2. At least 3 letters of reference.
3. You are invited to add or attach any additional information which will assist us in our evaluation.
4. Applicants are asked not to contact members of the board of education except as they may be requested to do so.

NAME _____

**PLEASE COMPLETE THE ENTIRE APPLICATION
IF ANY PART DOES NOT APPLY TO YOU, PLEASE INDICATE BY MARKING N/A.**

RETURN COMPLETED APPLICATION TO:

*Mr. Richard G. Rose
Search Consultant
Canajoharie Central School
136 Scholastic Way
Canajoharie, NY 13317*

Date _____

The Canajoharie School District/BOCES hereby advises students, parents, employees and the general public that it offers employment and educational opportunities, including career and technical education opportunities, without regard to race, color, national origin, sex or handicap. Grievance procedures are available to interested persons by contacting the person(s) listed on this page. Inquiries regarding this nondiscrimination policy may be directed to:

Title IX Coordinator: Deborah P. Grimshaw, Superintendent of Schools, 136 Scholastic Way, Canajoharie, N.Y. 13317, (518) 673-6302.

Section 504 Coordinator: Deborah P. Grimshaw, Superintendent of Schools, 136 Scholastic Way, Canajoharie, N.Y. 13317, (518) 673-6302.

PERSONAL DATA

1. Name _____
(Last)
(First)
(Middle)

2. Permanent Address _____
(Street & Number)
(City & State)
(Zip Code)

3. Home Phone # _____ Cell Phone # _____
(Area Code & Number)
(Area Code & Number)

4. Email Address _____

5. Present Employer _____
 Address _____
 Phone _____
(Area Code & Number)
 Position _____

6. Have you ever been convicted of a felony or misdemeanor? Yes No
 If "Yes", state the date, location, and nature of the act. _____

7. CERTIFICATION

STATE	DATE ISSUED	TITLE	PROVISIONAL/PERMANENT

8. EDUCATIONAL PREPARATION *(List in chronological order)*

HIGH SCHOOL AND COLLEGE/UNIVERSITY	ADDRESS	CONFERRED MAJOR/MINOR	DEGREE

9. TEACHING EXPERIENCE *(List in chronological order)*

SCHOOL	ADDRESS	DATES	GRADE/SUBJECT

10. ADMINISTRATIVE EXPERIENCE *(List in chronological order)*

SCHOOL	ADDRESS	DATES	POSITION

11. OTHER RELATED EXPERIENCE *(Include civic and community participation)*

FIRM/ORGANIZATION	ADDRESS	DATES	POSITION

12. REFERENCES

(Include the names of administrators or supervisors from your current and immediately previous employer)

NAME	OFFICIAL POSITION	COMPLETE MAILING ADDRESS	PHONE

IMPORTANT: I understand that the School District will make 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) as long as the information 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 the District regarding my application will be the property of the District and will not be released to me unless required by Federal or State statutes or regulation.

Candidate's Signature *Date*

MILITARY SERVICE

Branch *Date Entered* *Date Released* *Type of Discharge*

ATTESTATION

I understand that the information supplied in this employment application will be relied upon by the Canajoharie Central School District. I swear/affirm that these statements are true under the penalties of perjury, and I understand that the filing of a false instrument may be a crime punishable under New York State Law. I further acknowledge that making false statements in this application may subject me to criminal prosecution.

Initial here please