

BEMUS POINT CENTRAL SCHOOL DISTRICT
Administration Office
Bemus Point, New York 14712-0468
(716) 386-2375

APPLICATION FOR NON-INSTRUCTIONAL EMPLOYMENT

PERSONAL INFORMATION:

Date of Application _____

Name _____
(First) (Middle) (Last) (Maiden)

Present Address _____
(Street) (City & State) (Zip) (Phone)

Permanent Address _____
(Street) (City & State) (Zip) (Phone)

Social Security Number _____ Employee's Retirement System Number _____ U. S. Citizen _____
(ANY EMPLOYEE [FULL OR PART-TIME] IS ENTITLED TO JOIN THE RETIREMENT SYSTEM.)

How long have you been a resident of this state or city? _____

Do you have a valid driver's license _____ Yes _____ No

Position(s) applied for. _____

Present Position or status _____

Will you accept part-time employment? _____ Yes _____ No

Are you willing to work:			List times you can <u>not</u> work:
Evenings?	Yes _____	No _____	_____
Nights?	Yes _____	No _____	_____
Early morning?	Yes _____	No _____	_____
Weekends?	Yes _____	No _____	_____
Holidays?	Yes _____	No _____	_____

Are you on a lay-off and subject to recall? _____ Yes _____ No

Reason for leaving present position _____

When will you be available for employment? _____

What is your present salary? _____ Prepared to accept? _____

Do you have any physical, mental, or medical impairment or disability that would limit your job performance for any of these positions? _____ Yes _____ No

Have you been convicted of a crime? _____ Yes _____ No If yes, please explain _____

Have you ever been dismissed, or asked to resign, from a position? _____ If "yes," please give details. (Additional space on back)

PROFESSIONAL TRAINING:

School	Name and Location	Dates Attended		Degree & Date	TOTAL CREDIT		Major	Minor	Distinctions or Honors
		From	To		Sem. Hours	Quar. Hours			
High School						XXX	XXX	XXX	XXX
Colleges or Universities Attended									

WORK EXPERIENCE:

Name and Location of School	Immediate Supervisor	Telephone Number	From	To	Check One		Grade and Subjects Taught
					Full Time	Part Time	

Total Full Years Experience _____

OTHER WORK EXPERIENCE:

Firm	Location	Immediate Supervisor	Telephone Number	Kind of Work Performed	Length of Service

List experiences you have had working in the following fields:

Camp _____

Home _____

Community _____

Church _____

Other _____

REFERENCES:

These should be persons qualified and willing to give an honest appraisal of your fitness for the position you seek. Please include direct supervisors with whom you have worked.

Name	Position or Occupation	Address	Phone
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A. Professional References

1. _____
2. _____
3. _____

B. Personal References

1. _____
2. _____

MILITARY SERVICE:

Branch	Dates Served	
	From	To

Military experiences or training appropriate to the position you are seeking _____

OTHER EXPERIENCES:

Please describe briefly professional activities you have engaged in within the last three years (Curriculum Development, Professional Advancement, In-Service Training, Advisory Committees, etc.)

Honors you have earned _____

List professional, trade, business or civic activities and offices held. (Exclude those which indicate race, color, religion, sex or national origin):

Special Skills and Qualifications

Summarize special talents or abilities you possess outside your field _____
