

PERU CENTRAL SCHOOL DISTRICT

District Office
PO Box 68, School Street, Peru, New York
12972

APPLICATION FOR TEACHER OR TEACHING ASSISTANT

Thanks for your interest in being a member of our organization. Please print or type the information requested. Return your completed application to the district office, using the address provided above. Please provide us with your placement folder [if available], three written reference letters, resume, letter of interest, and a **copy** of college transcript[s] and any certificate or license you may have.

GENERAL INFORMATION

Last Name	First Name/Initial	Middle Name/Initial
Present Address		
Permanent Address if different]		
Daytime Telephone Number	Evening Telephone Number	Social Security Number
Are you a U. S. Citizen? yes no If no, what visa do you hold?		
Are you a veteran of the U.S. Military? yes no If "yes", please give date of discharge.		
Have you ever been convicted of a crime? yes no If "yes", please explain.		
Are you receiving benefits from the NYS Teachers Retirement System? yes no		
Are you receiving benefits from the NYS Employees Retirement System? yes no		
Have you been previously employed by our school district? yes no		
If "yes" to the question above: Start Date: __/__/__ End Date: __/__/__		
List any relatives or friends employed by our school district:		

The Peru Central School District is an equal opportunity employer. The District does not discriminate on the basis of race, color, national origin, creed, sex, age, handicap, or as otherwise decreed by Law, and is in compliance with Title IX of the Education Amendments of 1972 and with Section 504 of the Rehabilitation Act of 1973. Accordingly, nothing in this application should be viewed as expressing directly or indirectly any limitations, specifications or discrimination in connection with those listed areas. The Compliance Officer for Title IX and Section 504 can be contacted through the district office, at the address above.

EDUCATION PREPARATION

Please indicate any high school, undergraduate college, graduate school and/or technical/vocational school you've attended.

School Name and Location	Diploma & Date	Field of Study

COUNSELING, INSTRUCTIONAL AND/OR ADMINISTRATIVE WORK EXPERIENCE [MOST RECENT FIRST]

Name of Organization and Location	Begin Date	End Date	Your Role with That Organization	Reason For Leaving

ADDITIONAL EXPERIENCE OR SKILLS ASSOCIATED WITH INSTRUCTION

You're welcome to describe below any additional experiences or skills you have.

REFERENCES

Please list five [5] individuals, including your present supervisor, whom we may contact in regards to this employment application. Please provide us with your **placement folder** [if available] **and three reference letters.**

Individual's Name	Relationship To You	Address	Daytime Telephone	Office Use Only

Please indicate below any special notes regarding accessibility of references.

CERTIFICATION

Please provide us with a **copy** of any certificate or license you've earned.

Subject/Certification Area and State of Origin	Type	Effective Date	Expiration Date
NY Other___	Perm Prov Temp		
NY Other___	Perm Prov Temp		
NY Other___	Perm Prov Temp		
NY Other___	Perm Prov Temp		

If you're applying for this faculty position but are not yet officially certified, please indicate your certification status by checking **one** of the boxes below.

- Application submitted to New York State Education Department - certificate forthcoming
- Application submitted to New York State Education Department - their decision is still pending
- I have not yet filed an application with the New York State Education Department.

TENURE STATUS

Have you ever had tenure in New York State? If "yes", when and where? No Yes

Have you ever been denied tenure in New York State? No Yes
 If "yes", please explain. _____

Have you ever been denied a contract? No Yes
 If "yes", please explain _____

PERSONAL STATEMENT

Briefly summarize below [or as an attachment] your thoughts on why you believe you would be a strong match for Peru Central Schools

CANDIDATE STATEMENT

I hereby affirm that the statements made by me in this application are true, to the best of my knowledge and belief. I understand that any false or misleading statements will be considered justification for disqualification of my application or termination of my employment.

Today's Date

Signature of Applicant
This application is invalid without the signature
and date.

Thanks for your interest in being a member of our organization's faculty. Please return this completed document to:

Superintendent of
Schools Peru CSD
District Office PO Box
68, 17 School St Peru,
New York 12972