

# MASSENA CENTRAL SCHOOL DISTRICT

84 Nightengale Avenue  
Massena, New York 13662

## PROFESSIONAL APPLICATION

The Massena Central School District is an equal opportunity school district/employer which does not discriminate on the basis of race, creed, color, national origin, sex, age, disability, marital status, or any other reason prohibited by state or federal law in the employment, working conditions and educational opportunities of applicants, employees and students.

Please include the following attachments as part of your complete application:

- Current Resume
- Copy of College Diploma(s)
- Copy of Teaching Certificate(s)
- Complete and official transcripts of all Undergraduate and Graduate work
- Letters of Recommendation

\*\*Failure to provide all materials in this checklist may result in the elimination of your application.\*\*

Name \_\_\_\_\_ Date \_\_\_\_\_  
(Last) (First) (Middle) (Maiden)

Current Address \_\_\_\_\_ Phone(s) \_\_\_\_\_  
\_\_\_\_\_

E-mail Address \_\_\_\_\_ Social Security No. \_\_\_\_\_

Position applying for \_\_\_\_\_

## CERTIFICATION

Do you hold New York certification related to the above position(s)? \_\_\_\_\_ Yes \_\_\_\_\_ No

If yes, please list title and date of expiration (if any):

\_\_\_\_\_  
\_\_\_\_\_

Number of years full-time teaching experience \_\_\_\_\_

Have you ever been granted tenure? \_\_\_\_\_ Yes (Please attach proof) \_\_\_\_\_ No

If yes, please indicate district and date:

\_\_\_\_\_  
\_\_\_\_\_

## REFERENCES

Please list at least 3 references that have first hand knowledge of your teaching ability. Inexperienced teachers should give names of college faculty members, including those under whom you did student teaching and the names of cooperating teachers.

NAME	ADDRESS	TELEPHONE	OCCUPATION

If there is something else about yourself – your interests, special talents, career objectives, etc. – you would like us to be aware of, please mention them in this space. Also, please indicate if you would be interested in athletic coaching or extra-curricular advisors. Please feel free to include any inserts or additional information which might enable us to evaluate better your background, training, or abilities.

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## PHYSICAL RECORD

Can you perform the essential functions of the position sought with or without a reasonable accommodation? If a reasonable accommodation is necessary, please explain.

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Briefly answer the following questions:

1. What professional literature have you read in the past year?

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2. List any memberships or activities relevant to your ability to perform duties of the position.

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3. What has been your professional improvement program for the past three years?

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4. What are your plans for professional improvement in the future?

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### FORMAL EDUCATION

Institution	Major	Minor	Degree	Date Completed

**Note:** Copies of transcripts must be included with the application.

### PROFESSIONAL EXPERIENCE

Dates		Place	Years	Grade/Subject	Reason for Leaving
From	To				

Are you currently a member of the New York State Teachers' Retirement System? \_\_\_\_\_ Yes \_\_\_\_\_ No

If yes, please give your retirement number: \_\_\_\_\_

What is your current salary? \_\_\_\_\_

What is your expected salary? \_\_\_\_\_

When would you be available to begin? \_\_\_\_\_

Please **write** your response to the following. What interests you the most about this position?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**MORAL CHARACTER DETERMINATION:** Answer each question by checking "yes" or "no". If you answer "yes" to any questions, please attach a full explanation to your answer.

- Yes      Have you been dismissed, resigned from, entered into a settlement agreement, or otherwise left employment to avoid investigation and/or dismissal for alleged misconduct?
- No
  
- Yes      Did you receive a discharge from the Armed Forces of the United States which was other than "Honorable"?
- No
  
- Yes      Have you ever been convicted of any crime (felony or misdemeanor)\* (other than minor traffic violations)?
- No      *\*If "yes" submit a copy of the court record(s) including disposition of case.*
  
- Yes      Have you ever had an application for a teaching credential issued in New York or any jurisdiction revoked, suspended, annulled or otherwise invalidated?
- No
  
- Yes      Have disciplinary proceedings ever been initiated against you pursuant to New York State Education Law Section 3020-a or the disciplinary provisions of any other jurisdiction?
- No
  
- Yes      Have you ever been the subject of a report filed with the New York State Education Department pursuant to Part 83 of the Commissioner's Regulations (Determination of Good Moral Character)?
- No

**Fingerprinting**

**Have you ever been fingerprinted for the purposes of obtaining employment with a New York State public school district? \_\_\_Yes \_\_\_ No**

**If yes: Date \_\_\_\_\_ School District \_\_\_\_\_**

**If no: New York State requires all applicants hired after July 1, 2001 to be fingerprinted. The cost of this process is the responsibility of employee. Employment is contingent upon the results of this process. For more details, please see the attached directions.**

I understand and agree that Massena Central School District will verify all or part of the information I have supplied on this form. I understand that this verification may include credit history, motor vehicle driving record, criminal and civil records as well as any public record. I declare and affirm, under the penalty of perjury, that all the statements made in the foregoing application, including accompanying statements, are true, complete and correct. I understand that rendering any false information on this application may lead to criminal proceedings against me. I

further understand that rendering any false information on this application may, in the event I am ultimately employed by the district, result in disciplinary action against me, with a penalty up to and including termination.

I give Massena Central School District my full permission to contact former and current employers, law enforcement agencies, educational institutions, licensing/certifying agencies, and personal references. I authorize any and all of the above individuals and agencies to provide Massena Central School District with the information requested as long as it pertains to the job duties/responsibilities for which I have applied for. Further, I release from liability any such individual or agency contacted by Massena Central School District in connection with this application.

I further declare and affirm that any arrest and/or conviction that occurs subsequent to the date of the application, but prior to the issuance of any certificate, will be reported in writing to the Office of Teaching, Teacher Discipline Unit, Education Building -- 5 North, Albany, New York 12234. I understand that my failure to report such information may result in the invalidation of my certificate.

By signing this form, I consent to the release of information to the Department for the purpose of ascertaining my moral character pursuant to 8 NYCRR 83 of the Commissioner's Regulations.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

Please return to: Tracey Supernault  
Human Resource Department  
Massena Central School District  
84 Nightengale Avenue  
Massena, New York 13662