



Assistant Superintendent Hamilton-Fulton-Montgomery BOCES

Application of

NAME: _____

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

**ELECTRONIC SUBMISSIONS ONLY. SEND COMPLETED APPLICATION TO THE OFFICE OF
THE DISTRICT SUPERINTENDENT VIA EMAIL TO:**

Mrs. Jennifer Winton: jwinton@hfmboces.org

Subject line: HFM Search

Date: _____

Hamilton-Fulton-Montgomery BOCES and the school district do not discriminate on the basis of an individual's actual or perceived race, color, religion, religious practice, national origin, ethnic group, sex, gender identity, sexual orientation, political affiliation, age, marital status, military status, veteran status, disability, weight or any other basis prohibited by New York state and/or federal non-discrimination laws in its programs and activities, including admissions and employment, and provides equal access to the Boy Scouts and other designated youth groups. Inquiries regarding BOCES non-discrimination policies should be directed to Aaron Flynn (aflynn@hfmboces.org), Human Resources Manager, (518) 736-4330, or Dr. Lorraine Hohenforst (Lhohenforst@hfmboces.org), Deputy Superintendent, (518) 736-4305, HFM BOCES, 2755 State Highway 67, Johnstown, NY 12095. Inquiries may also be addressed to the Office for Civil Rights at the US Department of Education, 32 Old Slip, 26th Floor, New York, NY 10005, 646-428-3800, OCR.NewYork@ed.gov.

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. Retirement # _____
6. Present Employer _____
Address _____
Phone _____ Position _____
7. Earliest date available for employment _____

8. CERTIFICATION

STATE	DATE ISSUED	TITLE	PROVISIONAL/PERMANENT

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

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

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

SCHOOL	ADDRESS	DATES	GRADE/SUBJECT

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

SCHOOL	ADDRESS	DATES	POSITION

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

FIRM/ORGANIZATION	ADDRESS	DATES	POSITION

13. REFERENCES

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

NAME	OFFICIAL POSITION	COMPLETE MAILING ADDRESS	PHONE

IMPORTANT: By signing below, I hereby authorize Hamilton-Fulton-Montgomery (HFM) BOCES to verify and investigate all statements I have made on the employment application, related papers and in interviews. I authorize HFM BOCES to contact all employers and personal references listed on my employment application. In addition, I authorize all individuals, schools and employers mentioned on my employment application to freely provide any information requested that may be relevant and helpful in making a hiring decision. I release any such individuals, schools and employers from any and all legal liability or damage for disclosing any information about me. In addition, I understand that if this form is not signed and submitted with the appropriate completed application form, I will not be considered for employment by HFM BOCES.

Candidate's Signature

Date

14. MILITARY SERVICE

Branch

Date Entered

Date Released

Type of Discharge

15. BACKGROUND INFORMATION

A.	Are you a United States citizen?	Yes	No
B.	Have you ever been dismissed from, resigned from, entered into a settlement agreement, or otherwise left employment to avoid investigation and/or dismissal for alleged misconduct?	Yes	No
C.	Are you the subject of any pending investigation and/or disciplinary charge(s) pertaining to employment?	Yes	No
D.	Have you ever been found guilty after trial, or pleaded guilty, no contest, nolo contendere, or had adjudication withheld to a crime (felony or misdemeanor) in any court?	Yes	No
E.	Do you currently have any criminal charge(s) pending against you?	Yes	No
F.	Have you ever had an application for a teaching, professional or vocational credential (i.e., license, certificate or registration) in New York or any other jurisdiction denied?	Yes	No
G.	Have you ever surrendered a teaching, professional or vocational credential (i.e., license, certificate or registration) or had such credential revoked, suspended, invalidated or otherwise subjected to a disciplinary penalty in any jurisdiction?	Yes	No
H.	Are you the subject of any pending investigation and/or disciplinary charge(s) for professional misconduct in any jurisdiction?	Yes	No
I.	Have you ever been denied tenure?	Yes	No
J.	Have you ever resigned from a position to avoid the effects of a denial of tenure designation?	Yes	No
K.	Have you ever been the subject of a Part 83 notification to the State Education Department?	Yes	No

If you answered “Yes” to any of the above background questions (B-K), attach a separate sheet explaining each Yes response.

ATTESTATION

I certify that all statements herein are true, accurate and complete, and I understand that any false, misleading or willful omissions shall be just cause for dismissal or refusal of employment.

*Signature*_____ *Date*_____