



**Superintendent of Schools
Greater Johnstown School District**

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: Johnstown 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, 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

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 (A-K), attach a separate sheet explaining each Yes response.

PLEASE ATTACH A SEPARATE FILE RESPONDING TO THIS QUESTION:

Given what you know about the Greater Johnstown School District, what is your vision for moving the district forward?

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* _____