# Employment Application

**“Helping students develop personal excellence”**

## Personal Information

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<th>Name</th>
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<th>E-mail Address</th>
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Are you a U.S. citizen?  
Yes [ ]  No [ ]

If no, have you filed a declaration of intention to become a U.S. citizen?  
Yes [ ]  No [ ]

Have you ever been terminated from employment or volunteer service?  
Yes [ ]  No [ ]

If yes, please explain:  
__________________________

Have you ever been convicted of a crime (other than a traffic violation)?  
Yes [ ]  No [ ]

If yes, please explain:  
__________________________

Drivers License #  
State of Issue:  
(for transportation and maintenance positions)

Do you have relatives working for the Hannibal Central School District?  
Yes [ ]  No [ ]

Please list:  
__________________________

## Position Applying For

- [ ] Teaching / Administrative / Other Professional
- [ ] Non-Instructional  
  (clerical, custodial/maintenance, teacher aide, food service, bus driver)

Position:  
__________________________

- [ ] Substitute Teaching

Subject(s):  
__________________________

- [ ] full time  
- [ ] part time or substitute

Building Preference:  
__________________________
EDUCATION

High School
Name and location
Graduate yes □ no □
If no, currently attending? yes □ no □
GED yes □ no □

College
Name and location
Major
Hours completed
Degree

College
Name and location
Major
Hours completed
Degree

College
Name and location
Major
Hours completed
Degree

WORK EXPERIENCE (Please list most recent employment first)
For teaching applicants, please include student teaching if completed within the last five years.

Dates Employed
Employer (top line)
Address (bottom line)
Position (top line)
Wage (bottom line)
Reason for Leaving

1. ________________________________ ________________________________ ________________________________ ________________________________
   (From - to)

2. ________________________________ ________________________________ ________________________________ ________________________________
   (From - to)

3. ________________________________ ________________________________ ________________________________ ________________________________
   (From - to)

4. ________________________________ ________________________________ ________________________________ ________________________________
   (From - to)

5. ________________________________ ________________________________ ________________________________ ________________________________
   (From - to)

OTHER SKILLS OR TRAINING
Summarize other job-related skills or training you have acquired. ________________________________________________________

U.S. MILITARY SERVICE
Branch_________________________ Years Served: From _________ to__________ Highest Rank __________________________
Position _________________________________ Type of Discharge _______________________________________
Are you an active member of a National Guard or Reserve Unit? Yes □ No □
NOTE—this page applies only to applicants for teaching, pupil services, administrative or other positions requiring New York State certification.

CERTIFICATION
I hold the New York State Teaching or Administrative Certificate(s) described below. A copy of my certificate is included in my application.

<table>
<thead>
<tr>
<th>Certificate Type</th>
<th>Certification Area</th>
<th>Certification/License #</th>
<th>Date Issued</th>
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If holding a certificate from another state, please identify ________________________________________________________________

Other licenses held (type and issuing authority) ______________________________________________________________

If you do not hold a current N.Y.S. certificate, but are pursuing certification please state what steps you have completed and include verification with this application.

______________________________

______________________________

______________________________

TENURE STATUS
Were you appointed to tenure in a public school district in New York State? Yes ☐ No ☐

School District ___________________________ Effective Date ___________________________

Were you ever dismissed from a school district as a result of an Education Law Sec. 3020-a process? Yes ☐ No ☐

If yes please explain ______________________________________________________________

Did you ever resign from a school district in lieu of being terminated? Yes ☐ No ☐

If yes please explain: ______________________________________________________________

WRITTEN STATEMENT
Please submit a brief statement on a separate piece of paper that describes your professional aspirations, perspective on teaching and learning, or other information that would assist the District in evaluating your candidacy for a position.
REFERENCES
List four individuals having firsthand knowledge of your professional training, ability, experience and personal character. Include the name, address and telephone number of each to contact for personal or professional reference.

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<th>Name</th>
<th>Address</th>
<th>Phone #</th>
<th>How does this person know you?</th>
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May we refer to your present employer(s)? Yes [ ] No [ ]

ACTIVITIES
Please list scholastic, professional, or volunteer organizations to which you belong or participate. Also any other activities in which you participate that would be useful in evaluating your application. (Do not indicate any organization that would indicate race, creed, color or national origin)

INDEMNIFICATION & AFFIRMATION
I understand that the Hannibal Central School District makes inquiries regarding information I have provided in this employment application and I hereby release from any liability anyone giving information about me, whether specified in this application or not, so long as the information given is relevant to employment with the District. I understand that information gathered, in part or whole may be shared with members of the District involved in the employment process. I further understand that all information gathered by you regarding my application will be the property of the school district and will not be released to me unless required by a federal or state statute or regulation.

I hereby affirm under penalty of perjury that the information set forth in this application is true and complete to the best of my knowledge and belief, I understand that falsification or omission of information requested on this application is sufficient cause for disqualification of my application, or if employed, for dismissal.

_________________________________________  ______________________________
Signature of Applicant                      Date

This application and related correspondence must be submitted to:
Hannibal Central School District
District Office
928 Cayuga Street
Hannibal, NY 13074
Phone: 315-564-7900  FAX: 315-564-7263

Please do not call the district to see if your application was received. Mail it with tracking information or hand deliver it.

Applications will remain active for one year.
The Hannibal Central School District does not discriminate in employment or in its educational programs and activities against qualified individuals with disabilities, nor on the basis of age, gender, gender identity, race, color, religion or national origin.