

Willsboro Central School PO Box 180, 29 School Lane Willsboro, New York 12996

Phone: 518-963-4456 Fax: 518-963-7577

www.willsborocsd.org

NON-INSTRUCTIONAL APPLICATION

Position Applying For				
Personal Information				
Full name:	Phone n	umber:		
Street Address:	Email: _			
City: State:	Zip: Social So	ecurity:		
Educational Preparati	on			
1 High School:	L	ocation:		
Graduation Date:				
College/Undergraduate: _		Location:		
Major:	Degree:			
3 College/Undergraduate: _		Location:		
Major:	Degree:			
Work Experience (List most recent first)				
1 Position:	Organization:			
Dates:	Reason for Leaving:			
Supervisor's Name:	Phon	e Number:		
Position:	Organization:			
Dates:	Reason for Leaving:			
Supervisor's Name	Phon	e Number		

3	Position:	Organization:			
	Dates:	Reason for Leaving: _			
	Supervisor's Name:		Phone Number:		
4					
T	Position:	Organization:			
	Dates:	Reason for Leaving: _			
	Supervisor's Name:		Phone Number:		
R	eferences				
1	Name:	Position:	Address:		
	City, State, Zip	Phone Number	r: Email:		
2	Name:	Position:	Address:		
	City, State, Zip	Phone Number:	r: Email:		
3	Name:	Position:	Address:		
	City, State, Zip	Phone Number	r: Email:		
G	eneral Information				
Have you ever been convicted of crime? YES NO					
If yes, when, where and disposition of the offense?					
Are you legally authorized to work in the United States? YES NO					
Are you a U.S. veteran? YES NO					
If yes, please list experience and any special training received in the military.					

(Applicant's Signature)	(Date)
Willsboro Central School District to utilize the information obtained as a	
this application shall be considered cause for dismissal. I do hereby authon Central School District to contact my former employers. The purpose of th Central School District to obtain information regarding my work history a	is release is to permit the Willsboro
The facts set forth on this application are true and complete. I understand	
Applications will be kept on file for ONE YEAR from the date of application on file beyond that date, please notify the District Office in writing or subm	, , , , , , , , , , , , , , , , , , , ,
(If NO, you will contacted regarding fingerprinting procedures.)	
Have you ever been fingerprinted? YES NO	
The fee for fingerprinting is \$101.75 other / Bus drivers \$104.	
through Morpho Trust by going to their website at www.indentogo.com (1 ,
New York State School law requires that all personnel must be fingerprint	ed for employment and processed
position, including such things as special experience, training or interes	ets.
Please give a statement covering any additional information which will	help in judging your suitability for a

All applicants are required to submit a Civil Service Application.

Prospective employees will receive consideration without discriminations because of race, creed, color, sex, age, national origin, handicap, or veteran status.