

Last Name	First Name	Position Applied For	Date
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Return application to: **CORTLAND CITY SCHOOL DISTRICT**
1 Valley View Drive
Cortland NY 13045
 Phone: (607) 758-4100
 Fax: (607) 758-4128
 www.cortlandschools.org

TEACHING ASSISTANT EMPLOYMENT APPLICATION

PERMANENT ADDRESS

Street Number	City	State	Zip
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LOCAL ADDRESS

Street Number	City	State	Zip
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PHONE NUMBER:

Home _____ Work _____

EMAIL:

HOW DID YOU HEAR OF THIS VACANCY:

PLEASE COMPLETE THE ENTIRE APPLICATION.
IF ANY PART DOES NOT APPLY TO YOU, PLEASE INDICATE BY MARKING N/A.
DO NOT WRITE, "REFER TO ACCOMPANYING RESUME."

Thank you for your inquiry about a position with Cortland City Schools.
Only completed applications will be considered. To be complete, an application must include the following items:

- a) Completed Application
- b) Cover Letter
- c) Resume
- d) Three letters of reference
- e) Teaching Assistant, Teacher Certification **or**, if not certified, proof of Child Abuse and School Violence workshops plus proof of a passing score on the New York State Assessment of Teaching Assistant Skills Examination

You will be notified if you are selected for an interview.
Return all requested materials to the Personnel Office at the above address.
No staples please!

. The School District does not discriminate in employment or in the education programs and activities which it operates on the basis of sex, sexual orientation, age, ethnicity, religion, race, or handicap in violation of Title VII of the Civil Rights Act of 1964, Title IX of the Education Amendment of 1972, or § 504 of the Rehabilitation Act of 1973 and the New York State Human Rights Law.

Equal Opportunity Employee

A. PERSONAL INFORMATION

NYS Retirement System Member? Yes No If yes, indicate number _____

Present Employer _____

Address _____

Phone _____

Position _____ Salary _____

Are you prevented from lawfully becoming employed in this country because of Visa or Immigration status?
Yes No

Have you ever been convicted of a felony or misdemeanor?* Yes No
If yes, please explain (date, location, nature of act) _____

*No applicant will be excluded from consideration for employment due to prior arrests or convictions.

B. CERTIFICATION

I hold the New York State Teaching/Administrative Certificate(s) described below: (please provide copies)

Continuing Level I Level II Level III Pre-Professional **Teaching Assistant**

_____ Area Date Issued

Permanent Professional Provisional Initial

_____ Area Date Issued

If you do not have a NYS Teaching Assistant Certificate, have you made application for one? Yes No

Do you have an evaluation of your NYS certification status? Yes No (If yes, please enclose a copy)

Other licenses held; type and issuing authority _____

C. PRIOR TENURE RECORD

Have you ever received TENURE in any School District or Board of Cooperative Educational Services (BOCES) anywhere in New York State? Yes No If yes, please indicate:

Tenure area _____ Effective date _____

Name of District /BOCES _____

Were you ever dismissed from the school district conferring tenure pursuant to Education Law section 3020a?
Yes No

D. EDUCATIONAL PREPARATION (Please provide copy of transcripts for any college preparation.)

Name and location		Nature of Studies				
High School	Community College	College	Major	Minor	GPA	Degree

E. EDUCATIONAL WORK EXPERIENCE (List in Reverse Chronological Order)

If substitute or part time service, indicate as such.

Dates:		Name of School District/State	Nature of Position Grade Level/Subject	Total Years	If full time, approximate annual salary
From	To				

F. OTHER WORK EXPERIENCE (List in Reverse Chronological Order)

(Business, Trades, Summer Occupations - Include Military Service)

Dates:		Firm or Institution (include address)	Nature of Position	Relation to Full-time Work
From	To			

G. REFERENCES

Enter the following information for three persons who have closely observed your work as a professional. Please start with your most recent supervisor. **DO NOT LEAVE ANY SPACE BLANK.**

Name	Title	Organization	Telephone Number

H. APPLICANT'S STATEMENT: In your own handwriting, please describe:

- Why you are interested in this particular position?
- What particular strengths you would bring to our district?
- What additional personal information would you want to be considered in the evaluation of your application, including honors received, special talents or interests, travel, publications, advanced work, etc.

IMPORTANT: I understand that the Cortland City School District will make an extensive inquiry regarding my background and experience, and I hereby release from any liability anyone giving information regarding me (whether in my application or not) so long as the information is relevant to the duties for which I have applied. If requested, I will sign individual releases. I further understand that all

information gathered by the District regarding my application will be the property of the employer and will not be released to me unless required by Federal or State statutes or regulations.

I certify that the information is accurate to the best of my knowledge, that the information provided by me may be shared with the hiring committee members. I understand that incorrect, incomplete or false statements may subject me to discharge.

Applicant's Signature _____ Date _____