

Shelter Island Union Free School District

33 North Ferry Road
PO Box 2015
Shelter Island, NY 11964

631/749-0302
www.shelterisland.k12.ny.us

Substitute Employment Application

Date: _____

1. PERSONAL DATA: Mr./Ms./Dr. _____ Social Security Number ____-____-____

Last Name First I. Other Names

Current Address (To be used until _____)

Physical Location Number & Street Mailing Address (if different)

City State Zip Code

(_____) _____
Current Phone Permanent or Cell Phone e-mail address

2. POSITION SEEKING:

Elementary Education _____ Special Education _____ Subject _____
Middle School _____ High School _____ Grade Preferred _____

Have you ever been dismissed or asked to resign? Yes _____ No _____

If your answer to the above question is "Yes", please provide details on a separate sheet of paper, and return with this application.

3. CRIMINAL BACKGROUND INVESTIGATION:

Have you ever been convicted of a crime, felony or misdemeanor? YES _____ NO _____

Are you now a Defendant facing pending criminal charges in any Court? YES _____ NO _____

4. ARE YOU A CITIZEN OR PERMANENT RESIDENT OF THE UNITED STATES?

YES _____ NO _____

If your answer is "no", do you have authorization to work in the United States? YES _____ NO _____

5. EDUCATIONAL BACKGROUND (Please include a transcript of credits earned from each college)

A readable photocopy is acceptable for evaluation of your application. All transcripts become the property of the Shelter Island School District.

Schools Attended High School/College(s)/ Post Graduate	Location City/ State	Attendance From To	Credits Earned	Major	Graduation Mo./Year	Degree

6. PROFESSIONAL/TEACHING CERTIFICATE/LICENSE REVOCATION/ SUSPENSION:

Are you now, or have you ever been, the subject of a professional/teaching certificate or license revocation or suspension proceeding? YES _____ NO _____

Have you had a professional/teaching certificate or license revoked, suspended, or voluntarily suspended? YES _____ NO _____

7. TEACHING/PROFESSIONAL/OTHER WORK EXPERIENCE:

(Do not include student teaching) List experiences chronologically, beginning with the most recent experience leaving no gaps back to college graduation. Please be sure of accuracy of dates. Use separate page as necessary.

School System or Business	Address & Phone	Grade and/or Subject	From Mo./Year	To Mo./Year	Hours Per Week	Reason for leaving	Principal/Supervisor

8. PROFESSIONAL REFERENCES:

Please provide three professional references (college professors, student teacher coordinator, cooperating teachers, school administrators, supervisors). Personal references are not acceptable.

Name	Title	Address	Phone

9. AFFIRMATION AND AUTHORIZATION:

I hereby affirm that all information given by me in this application is true and complete to the best of my knowledge and belief. I understand that any misrepresentation, falsification, or omission will be sufficient cause for denial of employment or discharge.

I authorize my current and all former employers and my references to furnish the Shelter Island School District with information about my employment record, including a statement of the reason for the termination of my employment, work performance abilities, and other qualities pertinent to my qualifications for employment; hereby releasing them and the Shelter Island School District from all liability and responsibility arising from any information provided.

Date

Signature of Applicant

The Shelter Island Union Free School District does not discriminate in hiring on the basis or race, color, religion, sex, national origin, age, disability, veteran status or status in any other group protected by federal, state, or local law.