

Support Staff Employment Application

Shelter Island Union Free School District

33 North Ferry Road
PO Box 2015

Shelter Island, NY 11964

631/749-0302 631/749-1262 (Fax) www.shelterisland.k12.ny.us

Do Not Complete—For Office Use Only

Position hired for _____

Pay Rate _____ Date _____

Department _____ Shift _____

Start Date _____

Date of Application: _____

PLEASE PRINT AND COMPLETE AS THOROUGHLY AS POSSIBLE

First Name _____	M.I. _____	Last Name _____	Telephone Numbers: Home _____
			Cell _____ Work _____
Present Mailing Address: _____		Present Physical Address (If Different): _____	
Social Security Number: _____		Salary Required: _____	
Position(s) Desired:	<input type="checkbox"/> Teacher's Aide	<input type="checkbox"/> Custodian	<input type="checkbox"/> Other _____
	<input type="checkbox"/> Food Service Worker	<input type="checkbox"/> Clerical	
Shift (if applicable):	Days <input type="checkbox"/>	Evenings <input type="checkbox"/>	Any <input type="checkbox"/>
			Date Available to Work: _____

Education

Type of School	School Name	Location (City/State)	Date Entered	Date Left	Degree	Course Of Study
High School						
College Or University						
Other						

Professional Certificates or Licenses: _____

Driver's License Yes No Class _____

References

Name	Address	Telephone

Employment (List Present or Most Recent Job First)

Employer		Dates Employed		Responsibilities
		From	To	
Type of Business				
Address (Number & Street) (City) (State) (Zip)		Hourly Rate or Salary		Reason for Leaving
		Starting	Final	
Job title	Department			
Supervisor (Include Title)	Telephone			
Employer		Dates Employed		Responsibilities
		From	To	
Type of Business				
Address (Number & Street) (City) (State) (Zip)		Hourly Rate or Salary		Reason for Leaving
		Starting	Final	
Job title	Department			
Supervisor (Include Title)	Telephone			
Employer		Dates Employed		Responsibilities
		From	To	
Type of Business				
Address (Number & Street) (City) (State) (Zip)		Hourly Rate or Salary		Reason for Leaving
		Starting	Final	
Job title	Department			
Supervisor (Include Title)	Telephone			

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 _____

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 _____

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 of race, color, religion, sex, national origin, age, disability, veteran status or status in any other group protected by federal, state, or local law.