

# St. Regis Falls Central School

92 North Main Street, P.O. Box 309  
St. Regis Falls, New York 12980-0309  
(518) 856-9421

(St. Regis Falls Central School District is an Equal Opportunity Employer)

## Application For Employment

We consider applicants for all positions without regard to race, color, religion, creed, gender, national origin, age, disability, marital or veteran status, or any other legally protected status.

(PLEASE PRINT)

<b>Position(s) Applied For</b>		<b>Date of Application</b>	
<b>Last Name</b>	<b>First Name</b>	<b>Middle Name</b>	
<b>PO Box or 911 Address</b>	<b>City</b>	<b>State</b>	<b>Zip Code</b>
<b>Telephone Number(s)</b>		<b>Social Security Number (required)</b>	
<b>ARE YOU NYS CERTIFIED? IF YES, PLEASE PROVIDE COPY (IES).    <input type="checkbox"/> YES    <input type="checkbox"/> NO</b>			
<b>AREA(S) OF CERTIFICATION:</b> _____			
Best time to contact you at home is....._____am/pm			
If you are under 18 years of age, can you provide required Proof of your eligibility to work?.....Yes    No			
Have you ever filed an application with us before?.....Yes    No If Yes, give date _____			
Have you ever been employed with us before?.....Yes    No If Yes, give date _____			
Do any of your friends or relatives, other than spouse, work here?.....Yes    No			
Are you currently employed?.....Yes    No			
May we contact your present employer?.....Yes    No			
Are you prevented from lawfully becoming employed in this country because of Visa or Immigration Status? <i>Proof of citizenship or immigration status will be required upon employment.</i> .....Yes    No			
Date available for work ___/___/___    What is your desired salary range? _____			
Are you available to work:    Full-time    (please indicate 1 2 3 shift) Part-time    (please indicate Mornings Afternoon Evenings) Temporary    (please indicate dates available ___/___/___ - ___/___/___)			
Are you currently on "lay-off" status and subject to recall?.....Yes    No			




**List professional, trade, business or civil activities and offices held.** (You may exclude membership which would reveal gender, race, religion, national origin, age, ancestry, disability or other protected status): If


**If you need additional space, please continue on a separate sheet of paper.**

**Employment Experience**

Start with your present or last job. Include any job-related military service assignments and volunteer activities. You may exclude organizations, which indicate race, color, religion, gender, national origin, disabilities or other protected status.

**1**

Employer	Dates Employed From To	Worked Performed
Address		
Telephone Number(s)	Hourly Rate/Salary Starting Final	
Job Title   Supervisor		
Reason for leaving		

**2**

Employer	Dates Employed From To	Worked Performed
Address		
Telephone Number(s)	Hourly Rate/Salary Starting Final	
Job Title   Supervisor		
Reason for leaving		

**3**

Employer	Dates Employed From To	Worked Performed
Address		
Telephone Number(s)	Hourly Rate/Salary Starting Final	
Job Title   Supervisor		



**FOR PERSONNEL DEPARTMENT USE ONLY**

Arrange Interview  YES  NO

Remarks \_\_\_\_\_

Employed  YES  NO Date of Employment \_\_\_\_\_

Job Title \_\_\_\_\_ Hourly Rate/Salary \_\_\_\_\_ Department \_\_\_\_\_

By \_\_\_\_\_  
Name & Title Date