

NEWBURGH ENLARGED CITY SCHOOL DISTRICT
124 GRAND STREET
NEWBURGH, NEW YORK 12550
An Equal Opportunity Employer

HUMAN RESOURCE OFFICE

TEL. (845) 563-3460

APPLICATION FOR EMPLOYMENT

The Newburgh City School District operates all programs in compliance with Federal law which prohibits discrimination because of race, color, religion, sex, age, national origin or handicap.

COMPLETE IN FULL OR APPLICATION WILL NOT BE RETAINED

DATE _____

NAME

(Last Name First) Please provide any additional information regarding change of name, use of an assumed name or nickname which is necessary to enable a check of your work or school records.

ADDRESS

STREET CITY STATE ZIP
 PHONE NUMBER _____ SOCIAL SECURITY NUMBER _____ CITIZEN U.S.A _____

DO YOU HAVE A DRIVER LICENSE? _____ DO YOU HAVE TRANSPORTATION? _____

EMPLOYMENT DESIRED

Position(s) applied for Rate of pay expected \$ per week

Would you work Full-Time Part-Time Specify days and hours if part-time

Were you previously employed by us? If yes, when?

If your application is considered favorably, on what date will you be available for work? _____

RECORD OF EDUCATION

School	Name and Address of School	Check Last Year Completed (circle one)				Did You Graduate? (circle one)	
		5	6	7	8	YES	NO
Elementary							
High		1	2	3	4	YES	NO
GED	Date Received:					YES	NO
College List Degree and Major		1	2	3	4	YES	NO

MILITARY SERVICE RECORD

Were you in the U.S. Armed Forces? Yes No If yes, what Branch?

Dates of duty From To Rank at discharge
 Month/Day/Year Month/Day/Year Type of Separation

**APPLICANT AUTHORIZATION
FOR
RELEASE OF INFORMATION**

In connection with my application for employment with the Newburgh City School District, I authorize my present and former employers and any educational, Professional, or licensing agency to respond to a request from:

**Newburgh Enlarged City School District
124 Grand Street
Newburgh, New York 12550**

For verification of statements I have made on the job application form regarding my qualifications and employment history.

Applicant Name (Please Print)

Signature

Date

Other name(s) by which you have been known:
