

HUMAN RESOURCES OFFICE  
21 PAGE AVENUE  
COHOES, NY 12047  
518-237-0100 EXT. 2359  
518-233-1878 FAX



**APPLICATION FOR EMPLOYMENT – INSTRUCTIONAL**

(All Teachers, School Administrators and Teaching Assistants must apply on-line using [www.olasjobs.org/capital](http://www.olasjobs.org/capital) and will be required to complete this application at time of interview.)

**PLEASE PRINT**

NAME: (LAST) \_\_\_\_\_ (FIRST) \_\_\_\_\_ (MIDDLE) \_\_\_\_\_

PRESENT ADDRESS – STREET AND NUMBER \_\_\_\_\_

CITY AND STATE \_\_\_\_\_ ZIP CODE \_\_\_\_\_

PERMANENT ADDRESS (if different) \_\_\_\_\_

E-MAIL ADDRESS \_\_\_\_\_ CELL PHONE \_\_\_\_\_

HOME PHONE \_\_\_\_\_ WORK PHONE \_\_\_\_\_

POSITION APPLIED FOR \_\_\_\_\_ VACANCY # (if applicable) \_\_\_\_\_

How did you hear about this position? \_\_\_\_\_

Have you ever worked for the Cohoes City School District before?  Yes  No

If yes, where? \_\_\_\_\_ When? \_\_\_\_\_

Are you currently a member of a NYS Retirement System?  Yes  No

If yes, which system  TRS  ERS and number? \_\_\_\_\_

SCHOOLS ATTENDED: HIGH SCHOOL, UNDERGRADUATE SCHOOL, GRADUATE SCHOOL, OTHER					
NAME AND LOCATION	YEARS ATTENDED		DIPLOMA, DEGREE OR GED	COMPLETED YES/NO	FIELDS OF STUDY
	FROM	TO			

WORK EXPERIENCE				
EMPLOYER AND LOCATION	YEARS EMPLOYED		TYPE OF POSITION (Full, Part-Time, Seasonal, Temporary)	REASON FOR LEAVING
	FROM	TO		

**CERTIFICATION/PROFESSIONAL LICENSE INFORMATION**

It is the applicant’s responsibility to have official college transcripts, placement folder (if available) or a minimum of three written references and a copy of any certification or licensure issued by the State of New York forwarded to the Human Resources Office.

A. I hereby certify that I hold a teaching certificate issued by the University of the State of New York as follows:

Area of Certification	Form (e.g., initial, permanent, professional, provisional)	Date Issued	Expiration Date	Active or Inactive

B. A candidate not officially certified to teach in the public school of New York State should give the status of his or her application, if any, as follows (check one):

- 1. Submitted to and approved by the NYS Department of Education – Certificate forthcoming  
Date filed with NYS \_\_\_\_\_
- 2. Application filed, decision pending – Date filed with SED \_\_\_\_\_
- 3. Application not filed

**TENURE STATUS (CERTIFIED EMPLOYEES ONLY)**

Did you ever receive tenure status in a public school district or BOCES in New York State?  Yes  No

If yes, Official Tenure Area(s) \_\_\_\_\_ Effective Date(s) \_\_\_\_\_

Name(s), address(es) and phone number(s) of school district(s)/BOCES where tenure status was granted:

NAME (School or Office/Program Area)	ADDRESS	PHONE NUMBER	SCHOOL DIST/ BOCES

Did you serve a probationary period?  Yes  No If yes, how long? \_\_\_\_\_

**NOTE:** Upon appointment of a probationary teaching position within the Cohoes City School District, documentation of the above tenured position(s) and an APPR rating in your final year of service must be provided to Human Resources, according to Education Law 3012-c and/or Education Law 3012-d.

**REFERENCES**

Please list at least three professional references; two must be direct supervisors who can provide information on your qualifications for this position.

NAME	POSITION/TITLE	ADDRESS	PHONE

**PLEASE ANSWER THE REQUIRED LEGAL QUESTIONS**

- Are you a citizen of the United States of America?  Yes  No
- Have you ever been convicted of a crime?  Yes  No
- Have you ever been dismissed or asked to resign from a position?  Yes  No
- Have you ever resigned in lieu of facing termination, discipline and/or charges of misconduct?  Yes  No

- 5. Are any criminal charges currently pending against you? Yes No
- 6. Are you being investigated or under discipline at your current job? Yes No

If yes to 2, 3, 4 and/or 5 above, please explain below and attach additional sheets as necessary: \_\_\_\_\_

- 7. Have you ever been dishonorably discharged from military duty? Yes No
- 8. Has your teaching certification ever been terminated or temporarily suspended pursuant to a Part 83 hearing? Yes No
- 9. Are you legally eligible for employment in this country? Yes No
- 10. Have you ever been fingerprinted by the NYS Education Department? Yes No

The Cohoes City School District does not discriminate on the basis of race, color, national origin, sex, disability or age in its programs, activities, employment and admissions and provides equal access to the Boy Scouts and other designated youth groups. The following person has been designated to handle inquiries regarding the nondiscrimination policies: Human Resources, at tgarceau@cohoes.org, 518-237-0100 ext. 2359, 21 Page Avenue Cohoes, NY 12047. Inquiries concerning the application of the Cohoes City School District nondiscrimination policies may also be referred to the Office for Civil Rights, U.S. Department of Education, 32 Old Slip, 26<sup>th</sup> Floor, New York, NY 10005-2500, telephone: 646-428-3900, FAX: 646-428-3843, TDD: 800-877-8339, email: OCR.NewYork@ed.gov

Please submit this application along with your resume and cover letter and forward copies of your certification and transcript or placement folder. Also, please attach any additional experience or background information that will qualify you for this position.

**COHOES CITY SCHOOL DISTRICT**  
 Human Resources Office  
 21 Page Avenue, Cohoes, NY 12047 ♦ Phone: 518-237-0100 ext. 2359 ♦ Fax: 518-233-1878

**AFFIRMATION:** I affirm that all statements made on this form, including any accompanying papers, are true, accurate and complete to the best of my knowledge under penalty of perjury. I understand that false or incorrect information in this application is grounds for disqualification from further consideration or for subsequent dismissal from employment if I am hired. I voluntarily give the Cohoes City School District the right to investigate my past employment and all statements contained in this application.

**AUTHORIZATION:** I hereby authorize the Cohoes City School District to investigate references from my previous or current employers and all statements contained in this application.

\_\_\_\_\_  
Signature of Affirmation and Authorization Date \_\_\_\_\_