

# WALTON CENTRAL SCHOOL DISTRICT

47 - 49 STOCKTON AVE  
WALTON, N.Y. 13856-1493  
(607) 865-4116

42 - 66 NORTH ST.  
WALTON, N.Y. 13856-1300  
(607) 865-5220

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## NON - TEACHING APPLICATION

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Title of Position(s) for which you are applying \_\_\_\_\_

*We are an equal opportunity employer. The school district does not discriminate in employment or in the education programs and activities which it operates on the basis of sex, race, or handicap in violation of Title VI of the Civil Rights Act of 1964, Title IX of the Education Amendment of 1972, or Section 504 of the Rehabilitation Act of 1973.*

*A clear understanding of your background and work history will aid us in the possibility of placing you in a position that best meets your qualifications.*

**DIRECTIONS:** Please print or type. Answer ALL questions; write NO or NONE where applicable.  
Please spell out all names; DO NOT use initials or abbreviations.

**Name** \_\_\_\_\_ **Soc. Sec. No.** \_\_\_\_\_  
Last First Middle

**Present Address** \_\_\_\_\_ **Phone** \_\_\_\_\_  
Street Area Code

City State Zip Code

**Permanent Address** \_\_\_\_\_ **Phone** \_\_\_\_\_  
Street Area Code

City State Zip Code

**Were you hired by a public school district on or after July 1, 2001?** \_\_\_\_\_

### **EDUCATION**

LIST ALL EDUCATIONAL INSTITUTIONS ATTENDED IN CHRONOLOGICAL ORDER FROM HIGH SCHOOL ON.  
INCLUDE INSTITUTIONS ATTENDED EVEN THOUGH NO DEGREE WAS EARNED.

<u>INSTITUTION AND LOCATION</u>	<u>FIELD</u>	<u>DEGREE</u>
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_____	_____	_____
_____	_____	_____
_____	_____	_____

LIST OTHER EDUCATIONAL PREPARATION PERTINENT TO THE POSITION(S) FOR WHICH YOU ARE APPLYING  
(i.e. INSTITUTES, SEMINARS OR TRAINING PROGRAMS)

_____
_____
_____

### **CIVIL SERVICE EXAMINATIONS TAKEN**

<u>TITLE OF EXAM</u>	<u>DATE TAKEN</u>	<u>GRADE ACHIEVED</u>
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_____	_____	_____
_____	_____	_____

**WORK EXPERIENCE**

EMPLOYER/ADDRESS	
LENGTH OF EMPLOYMENT _____YRS _____MTHS	<b>DUTIES:</b>
POSITION	
REASON FOR LEAVING	

EMPLOYER/ADDRESS	
LENGTH OF EMPLOYMENT _____YRS _____MTHS	<b>DUTIES:</b>
POSITION	
REASON FOR LEAVING	

EMPLOYER/ADDRESS	
LENGTH OF EMPLOYMENT _____YRS _____MTHS	<b>DUTIES:</b>
POSITION	
REASON FOR LEAVING	

\*Please add additional sheets, if needed.

**REFERENCES**

Please list names, addresses and phone numbers of four (4) former supervisors or co-workers who have knowledge of your work habits, training, abilities, and experience.

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_

NOTES: IN YOUR OWN HANDWRITING, PLEASE ADD ANY COMMENTS THAT WILL ASSIST US IN MAKING A DECISION CONCERNING YOUR APPLICATION.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

HAVE YOU EVER BEEN CONVICTED OF A CRIME? \_\_\_\_\_ IF YES, GIVE DETAILS \_\_\_\_\_

\_\_\_\_\_

I understand that Walton Central School District will be making an extensive inquiry regarding my background and experience, and I hereby release from any liability anyone giving information regarding me (whether specified in my application or not) so long as the information given is relevant to the duties for which I have applied. If requested, I will sign individual releases. I further understand that all information gathered by you regarding my application will be the property of the School District and will not be released to me unless required by federal or state statutes or regulations.

DATE

SIGNATURE OF APPLICANT