CHEEKTOWAGA CENTRAL SCHOOL DISTRICT

3600 UNION ROAD CHEEKTOWAGA, NY 14225

APPLICATION FOR SUPPORT STAFF POSITION

| Date: | | Socia | I Security N | o: | |
|----------------|------------------------|--|----------------|---------------------|---------------|
| Name: | (Last) | (Firs | t) | (/\ | Middle) |
| Address: | (Street) | (City | ·) | (State) | (Zip Code) |
| Telephone: | (Permanent) | (Alternate) | (Peri | manent e-mail ad | ddress) |
| If YES, your | | ork State Employees' I | Retirement Sy | vstem? | ☐ ☐ Yes No |
| | | sly been submitted to the strain of the stra | | | □ □ Yes No |
| POSITION F | PREFERENCE | Interested In (ched | ck all that ap | pply): | |
| | | Full Time | Part Time | Substitu | ute |
| ☐ Clerical | | Cleaner | | ☐ Computer / | Aide |
| School Monitor | | ☐ Custodian | | ☐ School Nurse (RN) | |
| ☐ Teacher Aid | e Maintenance Mechanic | | | | |
| | | Laborer | | | |
| Other: | | _ | | | |

Please return completed application to the Personnel Clerk at the address above. Please be advised that an incomplete application may not be considered.

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PERSONAL BACKGROUND HISTORY

| | YES | NO |
|--|-----|----|
| Have you ever pleaded guilty to or been convicted of a crime (misdemeanor or felony)? If YES, explain on a separate sheet. | | |
| Are any criminal charges or proceedings pending against you? If YES, explain on a separate sheet. | | |
| 3. Are you a citizen of the United States of America? | | |
| If NO, do you have legal papers necessary to remain and work in the United States? | | |
| 4. Are you now, or have you ever been affiliated with a group which advocated a belief in opposition to the Constitution of the United States of America? | | |
| 5. Have you ever served in the Armed Forces of the United States? | | |
| If YES, did you receive a Dishonorable Discharge? (If YES, a Dishonorable Discharge is not an absolute bar to employment and other factors will affect a | | |
| final decision.) | | |
| 6. Can you perform the essential functions of the position for which you are applying with or without reasonable accommodation? | | |
| 7. Were you previously employed by us? If YES, provide details including job title, date of employment and reason for leaving. | | |
| 8. Have you ever been dismissed, resigned from, entered into a settlement agreement, or otherwise left employment to avoid investigation and/or dismissal for alleged misconduct? If YES, explain on a separate sheet. | | |
| Have you ever been the subject of a report of child abuse, maltreatment, or neglect? If YES, explain on a separate sheet. | | |

EDUCATION

| SCHOOL ATTENDED and CITY/STATE | | |
|--------------------------------|---------------------------|-------------------|
| ELEMENTARY | CHECK LAST YEAR COMPLETED | DID YOU GRADUATE? |
| | □ 5 □ 6 □ 7 □ 8 | ☐ YES ☐ NO |
| HIGH SCHOOL | CHECK LAST YEAR COMPLETED | DID YOU GRADUATE? |
| | □9 □10 □11 □12 | ☐ YES ☐ NO |
| COLLEGE | MAJOR/MINOR | DEGREE EARNED |
| | | |
| | | |
| GRADUATE SCHOOL | MAJOR/MINOR | DEGREE EARNED |
| | | |
| | | |

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EMPLOYMENT (LIST ALL EMPLOYERS BEGINNING WITH THE MOST RECENT FIRST)

| NAME: | DATES FROM/TO: |
|--------------------------------------|---|
| ADDRESS: | NAME OF SUPERVISOR: |
| | |
| PHONE: | REASON FOR LEAVING: |
| DUTIES: | |
| | |
| NAME: | DATES FROM/TO: |
| ADDRESS: | NAME OF SUPERVISOR: |
| | |
| PHONE: | REASON FOR LEAVING: |
| DUTIES: | |
| | |
| NAME: | DATES FROM/TO: |
| ADDRESS: | NAME OF SUPERVISOR: |
| | |
| PHONE: | REASON FOR LEAVING: |
| DUTIES: | |
| | |
| NAME: | DATES FROM/TO: |
| ADDRESS: | NAME OF SUPERVISOR: |
| | |
| PHONE: | REASON FOR LEAVING: |
| DUTIES: | |
| PERSONAL REFERENCES (LIST IND REFERE | VIVIDUALS WHO WOULD BE WILLING TO PROVIDE CHARACTER ENCES, NOT FORMER EMPLOYERS OR RELATIVES) |
| NAME: | PHONE: |
| ADDRESS: | |
| | |
| | |
| NAME: | PHONE: |
| ADDRESS: | |
| | |
| | |
| NAME: | PHONE: |
| ADDRESS: | |
| | |

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| I hereby certify that all my answers and factual repres application, including all attachments hereto, are true knowledge. I understand that any omission or false s application or any of its attachments will be sufficient discharge should I become employed by the Cheekto | and complete to the best of my tatement made by me on this grounds for refusal to employ, or for my |
|--|---|
| I hereby authorize the release of any and all information related to my application for employment. I further authorize the District to conduct investigations of my background at any time. I understand and agree that such background investigations may seek information concerning, but not limited to, my character and reputation, criminal convictions, fingerprint clearances, driving record, status of certifications and licenses, and any and all information from former and current employers, educational institutions, and personal references. I also hereby release and hold harmless the District, and any person or entity that provides information in response to such an investigation, from any liability in connection with the use or exchange of information about me, arising from or related to any such background investigation. | |
| Signature of Applicant | Date |

The Cheektowaga Central School District, Cheektowaga, New York, does not discriminate against any employee or applicant for employment in its programs or activities it operates on the basis of actual or perceived age, religion, natural origin, marital status, race, color, sex, sexual orientation, weight, ethnic group, religious practices, gender, veteran status, disability or handicap, or any other basis prohibited by State or Federal non-discrimination law. This policy of nondiscrimination includes the hiring and advancement of employees; salaries and other benefits; and the business activities of the Board of Education. Inquiries regarding Cheektowaga Central School District's non-discrimination policies and grievance procedures should be directed to Mr. Michael Fatta (mfatta@ccsd-k12.net) or Mrs. Erin Weir (eweir@ccsd-k12.net), who may be contacted at 3600 Union Road, Cheektowaga, NY 14225; phone 716-686-3606. Inquiries concerning the application of Title IX may also be referred to the Assistant Secretary for Civil Rights at: ocr@ed.gov.

For District Use Only

| Appointment Date | Position | Salary | Comments |
|------------------|----------|--------|----------|
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