

Skaneateles Central School District

Application for the Position of

Superintendent of Schools

Please TYPE OR PRINT CLEARLY since your application will be duplicated many times.



PERSONAL INFORMATION

Last Name _____

First Name _____ Middle Initial _____

Home Address _____

City/State/Zip _____

Telephone Number _____

Email Address _____

Business Address _____

City/State/Zip _____

Telephone Number _____

Present Employer _____

Title _____

Enrollment _____ Budget _____

Number of People Reporting Directly to You _____

New York State School District

Administrator Certificate Number _____

(Please enclose copy of SDA or SDL certificate.)

**Please mail
letter of interest,
current resumé,
and a completed
application to:**

**Dr. Brian Hartwell
District Superintendent
bhartwell@cayboces.org
Cayuga-Onondaga BOCES
1879 W. Genesee St. Rd.
Auburn, NY 13021**

****Submission deadline
is January 3, 2020.***

Skaneateles Central School District is an Equal Opportunity Employer, is in compliance with Title IX of the Educational Amendments of 1972 and does not discriminate on the basis of race, color, religion, sex, age or national origin.

EMPLOYMENT HISTORY

Please list all career experience in chronological order beginning with your present position. Please include both school and nonschool experience. Please attach an additional page if necessary.

Employer & Location _____

Position Held _____ Telephone Number _____

Dates (to/from) _____ Size of School/District _____

Reason For Leaving _____

Employer & Location _____

Position Held _____ Telephone Number _____

Dates (to/from) _____ Size of School/District _____

Reason For Leaving _____

Employer & Location _____

Position Held _____ Telephone Number _____

Dates (to/from) _____ Size of School/District _____

Reason For Leaving _____

Employer & Location _____

Position Held _____ Telephone Number _____

Dates (to/from) _____ Size of School/District _____

Reason For Leaving _____

MILITARY EXPERIENCE

Branch of Service _____ Rank/Specialty _____

Dates of Service: From _____ To _____ Discharge Type: _____

CERTIFICATES

Title of Certificate _____

Date Issued _____ Expiration Date _____ Valid in State of _____

Title of Certificate _____

Date Issued _____ Expiration Date _____ Valid in State of _____

EDUCATIONAL & PROFESSIONAL PREPARATION

Undergraduate Institution _____ Location _____

Major/Minor _____ Degree Earned & Date _____

Graduate Institution _____ Location _____

Major/Minor _____ Degree Earned & Date _____

Post-Graduation Institution _____ Location _____

Major/Minor _____ Degree Earned & Date _____

REFERENCES

Please provide four references who are familiar with your recent work achievements. Include the names of at least two current or past school board members.

Name _____ Title _____

Present Address _____

Email Address _____ Home/Business Phone _____

Name _____ Title _____

Present Address _____

Email Address _____ Home/Business Phone _____

Name _____ Title _____

Present Address _____

Email Address _____ Home/Business Phone _____

Name _____ Title _____

Present Address _____

Email Address _____ Home/Business Phone _____



BACKGROUND INFORMATION

1. Are you a United States Citizen? Yes No
2. Have you ever been fingerprinted for the purpose of employment? Yes No
3. Have you been cleared by NYSED for teaching? Yes No
4. Are you legally eligible for employment in this country? Yes No
5. Can you physically perform the essential functions of the position for which you are applying either with or without a reasonable accommodation? Yes No

If the answer to any of the following questions is "yes", please attach an explanation for each "yes" response to this application.

6. Have you ever been found guilty of charges pursuant to New York State Education Law 3020-a? (If you answer yes to this question, you will not necessarily be disqualified as an applicant for employment) Yes No
7. Have you ever been dismissed from a position, or resigned to avoid dismissal? (If you answer yes to this question, you will not necessarily be disqualified as an applicant for employment) Yes No
8. Have you ever received an unsatisfactory rating in conjunction with any pedagogical or school administration employment? Yes No
9. Have disciplinary charges ever been proffered against you by an employer? Yes No

WAIVER AND RELEASE FOR APPLICANT BACKGROUND CHECK

By signing below, I, _____, hereby authorize Cayuga-Onondaga BOCES (hereafter known as "BOCES") acting on behalf of Skaneateles Central School District (hereafter known as "the District") to verify and investigate all statements I have made on the employment application, related papers and in interviews. I authorize BOCES to contact all employers and personal references listed on my employment application. In addition, I authorize all individuals, schools and employers mentioned on my employment application to freely provide any information requested that may be relevant and helpful in making a hiring decision. I release any such individuals, schools and employers from any and all legal liability or damage for disclosing any information about me. In addition, I understand that if this form is not signed and submitted with the appropriate completed application form, I will not be considered for employment by the District.

Signature _____ Date _____

APPLICANT'S STATEMENT

I certify that all statements herein are true, accurate and complete, and I understand that any false, misleading or willful omissions shall be just cause for dismissal or refusal of employment.

Signature _____ Date _____