### Lake Shore Central Schools

Evans – Brant Central School District 959 Beach Road, Angola, New York 14006

## NON-INSTRUCTIONAL EMPLOYMENT APPLICATION

The Lake Shore Central School Distr basis of race, color, religion, gend orientation, status as a disabled or fide	er, marital status, a	ge, national origin, disal any other basis protect	bility, creed, sex, sexual
The Lake Shore Central School Distr all requests for reasonable accor accommodation at any stage of th Assistant	nmodations on a ca	se-by-case basis. If yo	u require a reasonable contact Melissa Bergler,
I understand that completion of this I by the District.	Employment Applica	ation does not guarante	e that I will be employed
*Employment applications are o	considered active for one	Date: year following the date of red	ceipt of application.
Name:(Last)	(First)	(Middle)	(**Other)
**Optional: If additional information relat to enable a check of your work, educatio	ive to a change of nar	ne, use of an assumed na	me or nickname is necessary
Address: (Street)	(City)	(State)	(Zip Code)
Alternate Address:			
(Street)	(City)	(State)	(Zip Code)
Telephone:////(Permanent) / (Altern	/ nate) / (Other)	e-mail address:	
Are you 18 years of age or older?	If not, state yo	ur age	
Are you legally authorized to work in	the United States?	□ Yes □ No	
Have you served in the Armed Force	es of the United Stat	es or in a State Militia?	□ Yes □ No
If yes, please provide date Did you receive a dishonoral (A dishonorable discharge is not an a	ble discharge?		
Are you a volunteer firefighter?		please provide photocopy of	exemption certificate)
Are you acquainted with or related to If yes, please provide the nam		employees or Board Me	mbers?   Yes  No

# **POSITION APPLYING FOR (Check all that apply)** I wish to be considered for: Full-Time Position \_\_\_\_\_ Part-Time Position \_\_\_\_\_ Substitute Position \_\_\_\_\_ Availability Date: \_\_\_\_\_ Salary Expected: \_\_\_\_\_ Position(s): BUS ATTENDANT MONITOR (hall, cafeteria) BUS DRIVER PERSONAL CARE AIDE BUS MECHANIC REGISTERED NURSE LABORER LICENSED PRACTICAL NURSE Passed Civil Service Exam? □ Yes □ No Title of Exam: \_\_\_\_\_ Date: \_\_\_\_\_ **EXPERIENCE/SKILLS** Clerical: Accounting Bookkeeping Computer Literacy Payroll Typing (WPM) Microsoft Office (Word, Excel, Access) Please describe these experiences, including the dates during which you obtained this experience and where you were working: Plant Maintenance: □ Boiler Operation □ Carpentry □ Electrical Heating/Ventilating □ Landscaping □ Welding □ Operation of Heavy Equipment □Painting □ Small Equipment Repair □ Shipping/Receiving/Inventory Please describe these experiences, including the dates during which you obtained this experience and where you were working: \_\_\_\_\_ Other Experience: □ Nursing □ Registered Nurse □ Licensed Practical Nurse □ Group Supervision □ Other: Please describe these experiences, including the dates during which you obtained this experience and where you were working: \_\_\_\_\_ Please list any other special training or in-service education that you feel are relevant to the position you seek (i.e. First Aid/CPR): Please list professional activities/organizations/offices/honors that you feel are relevant to the position you seek: Please list any special talents/abilities/interests/hobbies that you feel are relevant to the position you seek:

#### **EDUCATION PREPARATION**

NAME AND CITY/STATE	HIGHEST YEAR COMPLETED	DIPLOMA (YES/NO)	DEGREE OBTAINED (NAME OF DEGREE)
ELEMENTARY SCHOOL	4 5 6 7 8		
HIGH SCHOOL	9 10 11 12		
COLLEGE OR OTHER	1 2 3 4		

#### **EMPLOYMENT HISTORY** (List chronologically all experience)

EMPLOYER & ADDRESS OF EMPLOYER	DATES OF EMPLOYMENT	F/T OR P/T	POSTION HELD/DUTIES	REASON FOR LEAVING	SUPERVISOR'S NAME AND PHONE NUMBER
	То				

Have you previously worked for the District?

🗆 Yes 🛛 No

If yes, what was your position?

If yes, what were your reasons for leaving? \_\_\_\_\_

Have you ever been denied permanent status as a Civil Service employee anywhere?

□ Yes □ No

Are you the subject of any pending investigation and/or disciplinary charges pertaining to employment?

Yes	🗆 No
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Have you ever been the subject of an investigation by a school district or any other employer?

□ Yes □ No

Have you ever been dismissed from, resigned from, entered into a settlement agreement or otherwise left employment to avoid investigation and/or dismissal for alleged misconduct?

□ Yes □ No

Have you ever resigned to avoid denial of permanent status as a Civil Service employee? □ Yes 🗆 No Have you ever been asked to leave a place of employment (or volunteer position) or resigned in lieu of □ Yes 🗆 No being terminated? \*If you answered "yes" to any of the previous questions on this page, please explain full below. **CRIMINAL HISTORY** (A conviction will not necessarily disgualify you from employment. Factors such as age and date of conviction, the seriousness and nature of the crime, rehabilitation, and the relationship of the crime to the iob duties will be considered.) Have you ever been convicted of any offense, whether a felony, misdemeanor or violation, other than a minor traffic violation (DUI, DUAI or DWI convictions are not minor and must be reported)? (do not include sealed convictions or convictions classified as youthful offender) □ Yes 🗆 No Have you ever pled guilty to any offense, whether a felony, misdemeanor or violation, other than a minor traffice violation (DUI. DUAI or DWI convictions are not minor and must be reported)? (do not include sealed convictions or convictions classified as youthful offender) Yes 🗆 No Have you ever pled nolo contende or no contest to any offense, whether a felony, misdemeanor or violation, other than a minor traffic violation (DUI, DUAI or DWI convictions are not minor and must be reported)? (do not include sealed convictions or convictions classified as youthful offender) Yes 🗆 No Do you currently have any **pending** arrests or criminal investigations against you at this time? □ Yes □ No \*If you answered yes to any of the above questions in this section, please state the nature and dates of conviction(s) or plea(s) and, if applicable, date(s) of release from prison below. Have you been fingerprinted in accordance with Education Law? Yes 🗆 No Were you cleared from the New York State DCJS and FBI? Yes 🗆 No REFERENCES Name Title or Relation Address Telephone

#### CONDITIONS OF EMPLOYMENT

I, \_\_\_\_\_\_ (print name), hereby grant permission to the Lake Shore Central Schools (Evans-Brant Central School District), to contact and investigate my former and current employers, and all other pertinent parties, including but not limited to educational institutions where I enrolled, to fully investigate my background.

Pursuant to New York State Law, I agree to sign any additional forms of consent and/or to undergo any additional procedures required by either the District, NYSED, NYS DCJS or the FBI to effectuate a criminal record background check.

I hereby affirm that the information set forth in this application is complete, accurate and true to the best of my knowledge. I further affirm that I have read the completed application and have not withheld any information or response to any questions. I understand and agree that any misrepresentation or omission of fact on this application or during the interview process, regardless of when it is discovered, may result in the refusal of employment, or if I have already been employed, constitute cause for my immediate termination. References and personal information which became part of this record are to be regarded as confidential and will not be revealed to me.

I hereby indemnify, release and forever discharge and hold Lake Shore Central Schools and its officers, agents and employees, as well as all third parties supplying such information, harmless from any and all claims, demands, judgment and legal fees arising out of our in connection with this investigation, the results, or any lawful use of the results or disclosure thereto.

If requested by the District in connection with its application, I will take a physical examination. I agree that the examining authority may disclose the findings of these examinations of the District and that my initial employment is conditioned upon meeting the requirements of that examination as established by the District.

In the event that I am employed, I agree to conform to the District's rules and regulations.

Signature of Applicant

Printed Name of Applicant

Date