



Support Staff Application

Position for which you are applying:

Area and/or School
Full Time [ ] or Part Time [ ]

Name First Middle Last

Present Address Street City State Zip

Telephone No. ( ) Alternate No. ( )

Social Security No.: - -

Are you legally eligible for employment in the U. S.? YES [ ] NO [ ]

(Proof of citizenship may be required)

Are you of legal age to work? YES [ ] NO [ ]

Have you filed an application with us before? YES [ ] NO [ ]

If yes, give date (s) \_\_\_\_\_

Have you ever been employed by us before? YES [ ] NO [ ]

If yes, give date (s) \_\_\_\_\_

Are you employed now? YES [ ] NO [ ]

If so, may we contact your present employer? YES [ ] NO [ ]

On what date will you be available for work? \_\_\_\_\_

Full Time \_\_\_\_\_ Part-Time \_\_\_\_\_

Have you ever been convicted of a crime? YES [ ] NO [ ]

The Catskill Central School District is an equal opportunity school district/employer which does not discriminate on the basis of race, creed, color, national, origin, sex, age, disability, marital status, or any other reason prohibited by state or federal law in the employment, working conditions and education opportunities of applicants, employees and students.

RETURN TO: Catskill Central School District
Business Office
347 West Main Street
Catskill, New York 12414
518-943-4550

**REFERENCES**  
(AT LEAST THREE)

**Individuals indicated below MUST be able to be contacted by telephone.**

NAME	ADDRESS	TELEPHONE	TITLE / POSITION

**EDUCATIONAL AND PROFESSIONAL TRAINING**

	School / Address	Major	Degree	Dates	
				From	To
Elementary:					
High School:					
College:					

**EMPLOYMENT HISTORY**  
(BEGIN WITH MOST RECENT POSITION)

Date of Employment (From-To)	Name/Address of Employer/Military Service	Supervisor Name/Telephone	Job Title	Salary
<b>1.</b>				
Reason for Leaving:				
<b>2.</b>				
Reason for Leaving:				
<b>3.</b>				
Reason for Leaving:				
<b>4.</b>				
Reason for Leaving:				

