

ENRICHMENT APPLICANTS

Please note:

All applicants must be 16 years old

PRIOR

to July 1st of the current year.

Summer Enrichment applicants

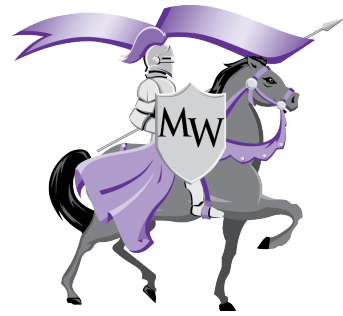
must be available

EVERYDAY

July 1st to mid August

MONROE-WOODBURY CENTRAL SCHOOL DISTRICT

Education Center
278 Route 32
Central Valley, NY 10917
(845) 460-6200
mw.k12.ny.us



ENRICHMENT PROGRAM

Name: _____

SWIMMING:

_____ Water Safety Instructors* _____ Lifeguards* _____ Diving

SPORTS:

_____ Boys Basketball (Gr 3-12)	_____ Boys Lacrosse	_____ Football
_____ Girls Basketball (Gr 7-12)	_____ Girls Lacrosse	_____ Boys & Girls T-Ball
_____ Boys Soccer (Gr 6-12)	_____ Cheerleading (Gr 2-6)	_____ Track & Field
_____ Girls Soccer (Gr 6-12)	_____ Girls Softball (Gr 5-12)	_____ Cross Country
_____ Coed Soccer (Gr K-5)	_____ Golf (4-12)	_____ Weight Training
_____ Coed Tennis (Gr 3-12)	_____ Golf (Adult)	_____ Yoga
_____ Coed Tennis (Adult)	_____ Gymnastics	_____ Zumba
_____ Girls Volleyball (Gr 4-12)	_____ Boys Baseball (Gr 3-12)	

ARTS & CRAFTS:

_____ Arts & Crafts (3-4 yrs)	_____ Arts & Crafts (5-6 yrs)	_____ Arts & Crafts (7-10 yrs)
_____ Sculpt & Ceramics	_____ Painting	_____ Cartooning
_____ Multi-Media	_____ Jewelry	_____ Sewing
_____ Puppet Making	_____ Fashion Design	

DRAMA:

_____ Play Production	_____ Acting	_____ Dance
_____ Costume/Make-up	_____ Set Design	_____ Improv

ADDITIONAL COURSES:

_____ ARC Babysitting	_____ Sign Language	_____ SAT Prep Course
_____ Cooking (Gr 3-6)	_____ ARC CPR/First Aid	_____ Criminal Invest.
_____ Spanish	_____ Italian (Gr 3-7)	_____ Chinese
	_____ Digital Design	

* Must have Red Cross cert

** Must have Red Cross Instructor cert

The Monroe-Woodbury Central School District is an Equal Opportunity Employer and does not discriminate on the basis of sex, race, religion, national origin, handicap, age, or marital status; nor does it apply any other arbitrary measure which would deprive persons of their constitutional rights.

INSTRUCTIONS TO APPLICANTS

1. Fill out this application as completely and accurately as possible. If additional space is needed for any information, attach additional pages.
2. At the end of this application you may add, by a separate attachment, any supplementary information that will enable the School District to make a more complete estimate of your qualifications.
3. Return completed application and materials to: Monroe-Woodbury Central School District
Assistant Superintendent for Human Resources
Education Center
278 Route 32
Central Valley, NY 10917
Phone: (845) 460-6200
mw.k12.ny.us

PERSONAL INFORMATION

Name _____
LAST FIRST MIDDLE

Other Name(s) _____
Please provide any additional information regarding name, change of name, use of an assumed name or nickname which is necessary to enable a check of your

Place of residence-address _____ Tel. () _____
STREET
CITY STATE ZIP

Permanent mailing address _____ Tel. () _____
(if different) STREET
CITY STATE ZIP

Telephone () _____ Cell Phone () _____ number at which you may be reached during business hours

Are you a citizen of the United States? Yes No

If not a citizen of the United States, do you intend to become a citizen of the United States? Yes No

Can you perform any and all job functions with or without a reasonable accommodation? Yes No

If yes, please describe how you would perform such job functions: _____

Have you had a fingerprint/criminal background check processed in any other New York State school District? Yes No

If yes, which school district? _____ Date of background check _____

Have you ever been convicted of a crime? Yes No

If yes, please give date and explain (conviction does not preclude employment):

EDUCATIONAL BACKGROUND

Name and Location of School

High School	Dates Attended	Program	Date diploma Granted

College (Undergraduate)*	Dates Attended	Nature of Studies		Degree	Date Granted
		Major	Minor		

WORK EXPERIENCE

Dates	Firm or Institution	Nature of Work	Full or Part -Time

Do you have a New York State Teaching Certificate. Yes No

If yes, which one(s) _____ Provisional Permanent

_____ Provisional Permanent

_____ Provisional Permanent

Have you ever been awarded tenure? Yes No District _____ Date _____

Have you ever been denied tenure? Yes No District _____ Date _____

Do you have any commitments to any employer which might affect your employment with us? Yes No

Have you ever been dismissed from a position or been asked to resign or retire as an alternative to dismissal? Yes No

REFERENCES

Give the names of four persons who have closely observed your work as a professional or who have first-hand knowledge of your character, personality, and/or your ability. If currently employed, include your present supervisor.

	1	2	3	4
Name	_____	_____	_____	_____
Official Position	_____	_____	_____	_____
Present Address	_____	_____	_____	_____
Telephone No.	_____	_____	_____	_____

CANDIDATE'S AFFIDAVIT

The facts set forth above in my application are true and complete, to the best of my knowledge, and I hereby authorize you to make any investigation necessary to verify the information provided in this application. I understand and agree that any false or misleading information in this application shall be sufficient cause for rejection of this application or, if employed, sufficient cause for dismissal subject to applicable provisions of law. Further, if employed, I understand and agree that my employment is for no fixed or definite period, and that I may be terminated at any time for any or no reason, subject to applicable provisions of law.

Signature of Applicant

Date

STATEMENT

OPTIONAL: In your own handwriting, indicate your strengths which will enable you to contribute to the educational programs of this district.
