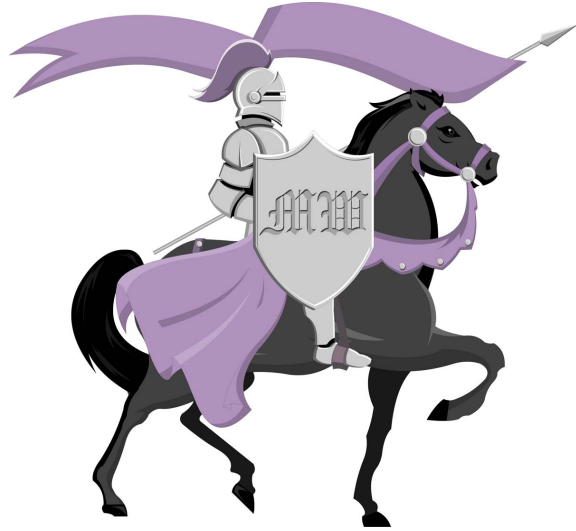


# ***MONROE-WOODBURY CENTRAL SCHOOL DISTRICT***

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



## **CLASSIFIED PERSONNEL**

Name: \_\_\_\_\_

**POSITION APPLIED FOR**

**Transportation Department**

\_\_\_\_\_

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 work records

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

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

Telephone 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 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		

Do you have license or certificate to practice a trade? Yes \_\_\_\_\_ No \_\_\_\_\_

If so, name trade: \_\_\_\_\_

Do you have an Operator's License? Yes \_\_\_\_\_ No \_\_\_\_\_ Class: \_\_\_\_\_

Have you ever attended an approved School Bus Driver Training Course? Yes \_\_\_\_\_ No \_\_\_\_\_

Have you had experience as a mechanic? \_\_\_\_\_ How many years? \_\_\_\_\_

Type:

Auto \_\_\_\_\_ Truck \_\_\_\_\_ Bus \_\_\_\_\_

## WORK EXPERIENCE

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

## RETIREMENT INFORMATION

Are you a member of the New York State Employees Retirement System? Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, when did you join the retirement system? 19\_\_\_\_ Retirement System Number \_\_\_\_\_

## 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.

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

Please mark with an asterisk those references who should not be contacted in the initial stages of processing this application.

## 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

