



Newfane Central School District

6273 Charlotteville Road
Newfane, NY 14108
716.778.6888
www.newfane.wnyric.org

Non-Instructional Employment Application

CONTACT INFORMATION:

Name: _____
(Last) (First) (Middle)

Print any other last name by which you are or have been known: _____

Address: _____
(Street) (City) (State) (Zip Code)

Telephone: _____
(Home) (Cell)

Type of Employment: I would like to be considered for (please check):

_____ **Full-Time** _____ **Part-Time** _____ **Substitute**

If applying to a specific job vacancy announcement, please list JVA # here: _____

Position(s) I would like to be considered for include (please check):

_____ **Clerical** – Can you type 35 wpm? Yes No Not sure

_____ **Custodial/Maintenance** – Do you have a valid NYS Driver's License? Yes No

_____ **Food Service Helper**

_____ **Lifeguard** – Valid CPR/AED and Lifeguard certification required

_____ **School Monitor**

_____ **School Nurse** - Attach a copy of NYS license

_____ **Summer Laborer** - Attach a copy of driver's license

_____ **Teacher Aide** (Instructional Associate)

Have you ever worked the Newfane Central School District? Yes No

If yes, then please provide dates and position(s) held: _____

Are there presently any felony or misdemeanor charges pending against you? Yes No

If yes, then please fully explain in detail on a separate sheet. Please sign the statement on the separate sheet. An affirmative response is not necessarily an automatic bar to employment.

Are you a member of the New York State Employees' Retirement System (ERS)?

If yes, then please provide your ERS Membership Number: _____

REFERENCES:

Give the names of three (3) references that have closely observed and supervised your work. Names of present and/or former employers (supervisors) are preferred.

NAME	BUSINESS	ADDRESS	PHONE

APPLICANT CERTIFICATION:

I certify, under penalties of perjury, that all information provided on this application form, and all other information provided in connection with my application for employment, is complete, accurate, and true. I understand that the provision of any false or misleading information, or any omission, will constitute grounds for disqualification or disciplinary action that may include termination of employment. I hereby authorize Newfane Central School District to contact any and all persons and entities, including but not limited to all of my present and/or former employers, in connection with the evaluation of my candidacy for employment. I also authorize any and all persons or entities, including but not limited to all of my present and/or former employers, to provide any and all information about me.

SIGNATURE OF APPLICANT: _____

DATE: _____

EQUAL OPPORTUNITY EMPLOYER

The Newfane Central School District is an equal opportunity employer and does not discriminate against any employee, student, applicant for employment or candidate for enrollment on the basis of gender, race, color, religion or creed, age, national origin, marital status, disability, sexual orientation or any other classification protected by law (including, with respect to employees and applicants for employment, genetic predisposition or carrier status), unless based upon a bona fide occupational qualification or otherwise provided for by law. Any person wishing to obtain information about the District's procedures for grieving alleged civil rights violations may obtain information by contacting Jennifer Bower, Civil Rights Compliance Officer, 6273 Charlotteville Road, Newfane, NY, 14108, telephone number 716-778-6468.