

**JOHNSON CITY CENTRAL SCHOOL DISTRICT**  
**666 REYNOLDS ROAD, JOHNSON CITY, NEW YORK 13790**  
**APPLICATION FOR EMPLOYMENT**

Please **TYPE** or **PRINT** clearly. This application must be completed and signed personally by the applicant. Each question must be answered in full. If answer is NO or NONE, indicate same. We appreciate your interest in our organization.

Johnson City Central School District subscribes to all Federal and State statutes which prohibit discrimination. We consider all applications for all positions without regard to race, color, religion, gender, national origin, age, disability, marital status, veteran, or any other legally protected status. Inquiries should be directed to Eric Race, Compliance Officer at (607) 930-1006.

NAME:                      Last                                      First                                      M.I.                                      Social Security Number

**PERMANENT ADDRESS:**

Street                                      City                                      State                                      Zip                                      Telephone Number

1. Are you 18 years or older?                                       yes     no
2. Are you employed now?                                       yes     no
- If so, may we inquire of your present employer?                                       yes     no
3. Position applied for: \_\_\_\_\_                                      Rate of pay expected \$ \_\_\_\_\_/wk
4. Other position(s) qualified for: \_\_\_\_\_
5. Are you legally eligible for employment in the United States?                                       yes     no
6. Special Licenses or Certifications: \_\_\_\_\_
- Expiration Date: \_\_\_\_\_
7. Have you taken a Civil Service Examination?  yes     no    Date: \_\_\_\_\_
- Test Title: \_\_\_\_\_
8. Do you belong to the New York State Employees' Retirement System:  yes     no
- If so, give retirement number: \_\_\_\_\_

**EDUCATION**

Circle Highest Grade Completed:	Grade School	High School	College	Graduate
	1 2 3 4 5 6 7 8	9 10 11 12	1 2 3 4	1 2 3 4
	Name and Location		Course	Degree (classification)

High School: \_\_\_\_\_

College: \_\_\_\_\_

Other Graduate, Business or Vocational School, or Other Training Skills: \_\_\_\_\_

Military Service Branch: \_\_\_\_\_    Years Served: \_\_\_\_\_    Rank: \_\_\_\_\_

