

# MADRID-WADDINGTON CENTRAL SCHOOL DISTRICT

Madrid, New York 13660

(315) 322-5746

[www.mwcsk12.org](http://www.mwcsk12.org)

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## APPLICATION FOR SUPERINTENDENT OF SCHOOLS

To the Applicant:

Thank you for your interest in our school.

1. Please complete this application form and forward it, along with your letter of application, to:

Madrid-Waddington Central School District

Office of the Superintendent

PO Box 67

Madrid, NY 13660

2. Have your career placement credentials forwarded immediately.
3. You are invited to add or attach any additional information which will assist us in our evaluation.
4. Applicants are asked not to contact members of the Board of Education except as they may be requested to do so.
5. The District would like to share more information with you. Please go to [www.mwcsk12.org/search](http://www.mwcsk12.org/search) for a multi-media informational tour. Alternatively, you may contact the District and request a CD which we will forward to you immediately. This application form may also be downloaded from either of those two sources.

1. Name \_\_\_\_\_  
Last First Middle

2. Home Address \_\_\_\_\_  
Street City State Zip Code

3. Work Address \_\_\_\_\_  
Street City State Zip Code

4. Telephone (home) ( ) \_\_\_\_\_ Telephone (work) ( ) \_\_\_\_\_

5. New York State Certificates held:

Certificate Title	Certificate No.	Type	Date Issued	Term
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

6. Are you a member of the New York State Teachers' Retirement System? \_\_\_\_\_

If yes, membership number \_\_\_\_\_ Membership date \_\_\_\_\_

7. Social security number \_\_\_\_\_

8. Are you a United States Citizen? \_\_\_\_\_

9. Have you ever been convicted of a felony? \_\_\_\_\_

If yes, explain. \_\_\_\_\_

10. Have you ever been subject to a professional investigation by the Bureau of New York State

Certification? \_\_\_\_\_

11. Have you ever been asked to resign from a position? \_\_\_\_\_

**Educational and Professional Training**  
Please complete this section carefully and in detail.

Name of Institution and Location <u>Including High School</u> , College, Graduate Work, and Summer Sessions in order taken	Total Credit Hours	Degree or Diploma Received	Major subject area and credit hours earned therein	Minor subject area and credit hours earned therein

List college honors received, as well as other honors before or since graduation. \_\_\_\_\_

Were you trained for another profession or occupation before entering the field of education? \_\_\_\_\_

If so, describe. \_\_\_\_\_

## Internship Experience

List school, grade levels, and areas of responsibility for your administrative internship:

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### EXPERIENCE IN TEACHING OR EDUCATIONAL ADMINISTRATION (Do not include student teaching)

Location	Name of School	Type of work, Grades or Subjects	Number of years	Dates (From - To)	Approx. No. of Teachers in System
			Total years		

Number of students in present school district \_\_\_\_\_

Number of employees in present school district \_\_\_\_\_

Number of employees in your district whom you supervise \_\_\_\_\_

### Adult work experience other than education:

Name of firm or Employer	City, State	Kind of work	Dates of Employment	Reason for leaving

Have you ever been tenured in another school district? \_\_\_\_\_

If so, what district? \_\_\_\_\_

What is your present position? \_\_\_\_\_ Present salary \_\_\_\_\_

Number of years in present position \_\_\_\_\_ Current contract expiration date \_\_\_\_\_

List dates of military service in United States Armed Forces, if applicable \_\_\_\_\_

Have you ever received a dishonorable military discharge? \_\_\_\_\_

**REFERENCES (3 or more):**

List superintendents, principals, supervisors, and Board of Education members under whom you have taught, and others who have first-hand knowledge of your character and ability as a teacher or administrator. (NOTE: if recommendation from any of these persons is included in your placement bureau folder, please place an asterisk [\*] before that name.)

Name and position	Address	Home phone	Office phone

I hereby certify that the facts set forth in the above employment application are true and complete to the best of my knowledge. I give the Employer the right to investigate all references and to secure additional information about me, if job-related. I hereby release from liability the Employer and its representatives for seeking such information and all other persons, corporations or organizations for furnishing such information. I understand that a background investigation of candidates will be completed at the finalist stage of the search.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature

The Madrid-Waddington Central School District is in compliance with the Educational Amendments of 1972; Title IX, specifically disallowing any practice of discrimination. Mr. Kendall Straight, Compliance Coordinator, may be contacted at MWCS, Madrid, New York 13660. or telephone (315) 322-5746.