## **Application for Teacher**

## MADRID-WADDINGTON CENTRAL SCHOOL

P.O. Box 67, 2582 State Highway 345 Madrid, New York 13660 315-322-5746, ext. 221

## Required:

- 1. Complete this application form and forward it to the Superintendent's Office
- 2. Include a resume with your cover letter and two letters of recommendation with this application.
- 3. Request that your college placement folder and official copies of your college transcripts be forwarded as soon as possible.
- 4. Provide copies of New York State teaching certificates with this application.

(Street) (City) (State) (Zip) (Telephone Member (City)) (Telephone Members:  U.S. Citizen: Yes / No Social Security Number	(Middle)
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Initial: (Date)		(Title)		(Expiration)
Professional: ( or Permanent	(Date)	(Title)		(Expiration)
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Position	Dates of Employment	Employer	Employer's <u>Address</u>	Telephone <u>Number</u>
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VIII. INFORMATION FOR THE APPLICANT: Your Application: We appreciate the time and interest you have taken making this application to Madrid-Waddington Central School District. If you have other questions concerning employment in Madrid-Waddington Central School District or the community itself, we will make every effort to answer them for you.

Minimum Preparation: A Bachelor's Degree and New York State Teaching Certification are required for securing employment as a teacher at Madrid-Waddington Central School District.

Certification: The individual teacher assumes the responsibilities for obtaining and renewing certification. Certification must be registered by a teacher with the Superintendent of Schools when the teacher is appointed to a position. Information on the requirements for certification and application forms may be obtained from the Superintendent of Schools.

IX. Madrid-Waddington Central School is an Equal Opportunity Employer. Mr. Eric Burke is the Compliance Officer for Title IX. Any inquiries regarding compliance with Title IX should be directed to the Compliance Officer, Madrid-Waddington Central School, PO Box 67, Madrid, New York 13660 (315-322-5746), or through the Director of the Office of Civil Rights, Department of Health, Education and Welfare, Washington, D.C. I understand, should I be employed by the Madrid-Waddington Central School District either on a permanent or substitute basis, that I will be informed of my rights to join the New York State Retirement System. I authorize the Madrid-Waddington Central School District to investigate all statements in this application and to secure all appropriate information from all my employers, references, academic institutions, and from governmental departments and agencies. I do hereby authorize such employers, references, academic institutions, and governmental departments and agencies to release such information and I do hereby release all of those employers, references, academic institutions, and the Madrid-Waddington Central School District from any and all liability arising from their giving or receiving information about my employment history, my academic credentials or qualifications, and my suitability for employment with the Madrid-Waddington Central School District.

DATE

SIGNATURE

	Do not write below this line	
<b>Application received:</b>		
Comments/Notes:		