



# Tully Central School District

Education Today for Tomorrow's Challenges



## Employment Application

### Support Staff Employment Application

Date of Application: \_\_\_\_\_

Directions: Below are (8) sections to be completed by applicants  
Section (6) should be completed by Bus Driver applicants only.  
Section (5) should be completed by Office/Clerical applicants only.

### 1. Personal Information

Name \_\_\_\_\_

Last

First

Middle

Permanent Mailing Address \_\_\_\_\_ Phone ( ) \_\_\_\_\_

Zip \_\_\_\_\_

Telephone Number: \_\_\_\_\_ Date Available: \_\_\_\_\_

Name of nearest Neighbor or Relative: \_\_\_\_\_ Phone No.: \_\_\_\_\_

Social Security Number \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Are you a U.S. citizen?  Yes  No If no, have you filed a declaration of intention to become a citizen?  Yes  No

Are you a: current Member  Yes  No Veteran  Yes  No Disabled Veteran of the Armed Forces?  Yes  No

Are you an exempt volunteer fireman?  Yes  No

Have you ever been convicted of a crime?  Yes  No If yes, explain. \_\_\_\_\_

Have you been fingerprinted pursuant to Part 87 of the Regulations of the Commissioner of Education (Criminal/History Record Check for Prospective School Employees & Applicants for Certification)?  Yes  No

### 2. Type of Position Applying For (Please X):

#### Substitute (call as needed)

- \_\_\_ Substitute Cleaner
- \_\_\_ Substitute Bus Driver
- \_\_\_ Substitute Cafeteria Helper
- \_\_\_ Substitute Bus Monitor
- \_\_\_ Other \_\_\_\_\_
- \_\_\_ Aide \_\_\_\_\_ (10 month)

#### Full Time/Part-Time (Regular Schedule)

- \_\_\_ Custodian/Bus Driver (full time)
- \_\_\_ Cafeteria Helper (part time)
- \_\_\_ Cleaner (part time)
- \_\_\_ Bus Driver (regular run)
- \_\_\_ Clerical/Office (full time)
- \_\_\_ Mechanic/Helper (full time)

### 3. Education/Training:

High School(s) attended: \_\_\_\_\_

Grade completed: \_\_\_\_\_

\_\_\_\_\_

Grade completed: \_\_\_\_\_

College(s) attended: \_\_\_\_\_

Years attended: \_\_\_\_\_

\_\_\_\_\_

Years attended: \_\_\_\_\_

Technical/Business School: \_\_\_\_\_

Other training (please describe): \_\_\_\_\_

\_\_\_\_\_

List any degree, special licenses or certifications: \_\_\_\_\_

\_\_\_\_\_

### 4. General Information

1) List any impairments, physical, mental or medical, which might interfere with your ability to perform the job(s) for which you are applying: \_\_\_\_\_

\_\_\_\_\_

2) Have you ever been convicted of any misdemeanor or felony crime? (If yes, give details):

\_\_\_\_\_

\_\_\_\_\_

3) # of days absent from work due to illness during the past 3 years: \_\_\_\_\_

### 5. Clerical/Office Applicants Only:

1) Can you type?  Yes  No Words per minute: \_\_\_\_\_

2) Can you take shorthand?  Yes  No Words per minute: \_\_\_\_\_

3) Can you use a dictation machine?  Yes  No

4) Have you worked with computers?  Yes  No Types: \_\_\_\_\_

5) List any word processing or database software you have worked with:

\_\_\_\_\_

6) List other office/clerkal skills you have: \_\_\_\_\_

\_\_\_\_\_

## 6. Bus Driver Applicants Only:

- 1) Are you at least 21 years of age?  Yes  No
- 2) Do you have a valid New York State driver's license?  Yes  No
- 3) Do you currently have a CDL license?  Yes  No
- 4) Have you ever driven a school bus or similar type bus?  Yes  No
- 5) Have you had an accident while driving during the past 5 years that resulted in injuries?  Yes  No
- 6) Have you been convicted of a moving violation in the past 5 years?  Yes  No
- 7) Have you ever been convicted of a DUI, DWI or DWAI?  Yes  No

If yes, please describe \_\_\_\_\_

- 8) Have you ever been convicted of any misdemeanor or felony?  Yes  No

If yes, please describe: \_\_\_\_\_

- 9) Have you ever attended a bus driver training course?  Yes  No
- 10) Have you ever had your license suspended or revoked?  Yes  No

If yes, please describe: \_\_\_\_\_

- 11) List your Motorist Identification Number: \_\_\_\_\_
- 12) Number of years driving automobiles: \_\_\_\_\_
- 13) Number of years driving bus: \_\_\_\_\_

## 7. Employment History: (List most recent position first)

Dates Employed	Employer's Name & Address	Specific Nature of Position	Reason for Leaving

## 8. References:

Please list 3 references, that are not relatives:

Name	Address	Phone #	Relationship

## Applicant's Statement (Optional):

Give any additional information which you think might be of value in considering you for a position.

---

---

---

---

---

---

---

---

---

---

I certify that all statements made by me on this application are true and complete. I understand that any false or misleading statements made by me will be considered justification for disqualification of my application or termination of employment.

--

Applicant's Signature

--

Date

Please return completed application to:

**Tully Central School District  
District Office  
20 State Street  
P.O. Box 628  
Tully, NY 13159-0628**

**Equal Opportunity Employer**