

DATE: _____

GUILDERLAND CENTRAL SCHOOL DISTRICT

ATTN: Human Resources Office
8 School Road – PO Box 18
Guilderland Center, NY 12085-0018
(518) 456-6200

Social Security No. _____
Teachers' Retirement No. _____
Date of Availability _____
Are you a citizen of the U.S.? _____
Guilderland is a Tobacco Free School District

PROFESSIONAL APPLICATION

Last Name	First	Middle
Present Address		
Street	City	State Zip
Permanent Address		
Street	City	State Zip
Telephone – present address (please include area code): _____		
Telephone – permanent address (please include area code): _____		
Position desired: Teaching _____ Administrative _____		
Other _____		
Grade or subjects you prefer to teach – in order of preference: _____		

EDUCATIONAL WORK EXPERIENCE

List most recent experience first. Include any substitute teaching, and indicate as such.

Dates From/To	Name and Location of School	Nature of Position i.e., grade level, subject, etc.	Total Years

Student Teaching/Internship:

Dates From/To	Name and Location of School	Subject or Grade Level

EDUCATIONAL PREPARATION

Name and Location of School	Dates Mo/Yr From/To	Nature of Studies		Diploma or Degree	Date Granted
High School		Major	Minor		

College (Undergraduate)		Major	Minor		

Have you taken work which has Resulted in the conferring of an Advanced degree? If so, summarize.	Dates Mo/Yr From/To	Major Specialization	Number of credits	Degree	Date Granted

Summarize graduate work beyond the highest degree earned or graduate work not leading to a degree.	Dates Mo/Yr From/To	Indicate major concentrations, if possible	Number of credits	Additional Information

SCHOLASTIC and OTHER HONORS: _____

Undergraduate Grade Point Average: _____ Graduate Grade Point Average: _____

REFERENCES

Give the names of four persons who have closely observed your work as a professional or as a student. You are advised to include letters of reference. Recommendations by present and former superintendents, principals and other supervisors are preferred in the case of experienced teachers or supervisors. Beginning teachers will please include practice teaching supervisor's recommendation.

	1	2	3	4
Name				
Official Position				
Present Address (Zip Code)				
Tel. No. & Area Code				
E-mail address (if known)				

You are encouraged to forward your college credentials to be included in your application.

