

SPACKENKILL UNION FREE SCHOOL DISTRICT

Human Resources - 15 Croft Road
Poughkeepsie, New York 12603
(845) 463-7800

APPLICATION FOR EMPLOYMENT

Please check: Aide / Monitor Custodial Worker **Available to Substitute** Yes No
 Clerical Grounds High School Todd M.S.
 Food Service Maintenance Nassau Elem. Hagan Elem.
 Bus Driver Other _____ District Wide

The New York State Human Rights Law prohibits discrimination in employment because of age, race, creed, color, national origin, sex, disability, or marital status. Accordingly, nothing in this application form should be viewed as expressing, directly or indirectly, any limitation, specification, or discrimination as to age, race, creed, color, national origin, sex, disability, or marital status in connection with employment in the Spackenkill Union Free School District.

Name _____ Date _____

Address _____ Phone _____

City _____ Zip Code _____

Email Address _____

Are you a member of the NYS retirement system? Yes, _____ Ret. No. _____ No

Social Security No. _____ Citizen of U.S.? Yes No

Have you had your fingerprints taken for a school district? Yes, Date _____ No

Marital Status _____ Date of Birth _____ Gender Female Male

EDUCATION

Schools Attended

Degree or Diploma

DESCRIPTION OF EXPERIENCE

Firm Name: _____ Position: _____

Firm Address: _____ Phone: _____

Supervisor: _____ Length of Employment: _____

Description of Duties: _____

Firm Name: _____ Position: _____

Address: _____ Phone: _____

Supervisor: _____ Length of Employment: _____

Description of Duties: _____

Firm Name: _____ Position: _____

Address: _____ Phone: _____

Supervisor: _____ Length of Employment: _____

Description of Duties: _____

PROFESSIONAL REFERENCES *(Please list a minimum of 3 references - friends or relatives are not acceptable)*

Name _____ Employer _____ Email _____ Phone _____

Did you graduate from Spackenkill High School? Yes - Year _____ No

Do you have a valid license to operate a motor vehicle in New York State? Yes No

Do you need a reasonable accommodation to perform the essential functions of the job for which you apply? Yes No
If yes, please explain _____

Have you ever been found guilty of charges brought pursuant to NYS Civil Service Law §75 or any other disciplinary proceeding?
 Yes No If yes, please give the specifics of the charge(s) of which you were found guilty, the penalty you received and when the determination as to guilt and penalty were made.

Were you ever dismissed or discharged from any employment for reasons other than lack of work or funds? Yes No

Have you ever been convicted of any crime (felony or misdemeanor)? * Yes No
If yes, please explain _____

If you served in the Armed Forces of the United States, did you receive a discharge which was other than honorable?
 Yes No Not Applicable

If yes, you may attach specifics on a separate sheet of paper.

** The District reserves the right to diligently confirm this information.*

Date

Signature of Applicant

For any individual who has not been hired by the district, this application will be destroyed after a period of one year has elapsed. Please feel free to reapply if you are still interested in employment in the Spackenkill School District.

FOR OFFICE USE ONLY

REFERENCE CHECK INFORMATION

Name _____ Comments _____ Date Contacted _____

Date Interviewed _____ Comments _____

Administrator's/Supervisor's Signature _____ Date _____

Superintendent's Signature _____ Date _____

Submitted for Board of Education Approval _____ Board Meeting Date _____

Date of Final Clearance granted _____

OFFICE USE ONLY

Interviewed _____
Reference Ck _____
Fingerprinted _____



OSPRA 102 (1/03)

Clearance For Employment Request Form

Type or Print All Information

Office of School Personnel Review and Accountability
 NYS Education Department
 987 Education Building Annex
 Albany, NY 12234
 ph: (518) 473-2998 fax: (518) 473-8812
www.highered.nysed.gov/tcert/ospra
OSPRA@mail.nysed.gov

- Instructions**
- This form is to be filed to secure a "Clearance for Employment" for an individual who has been previously fingerprinted on New York State Education Department (SED) fingerprint cards or the New York City Department of Education (NYCDOE) fingerprint cards.
 - Sections 1 and 3 are to be completed by the prospective employee.
 - The school district, charter school or BOCES must complete section 2.

Type or print all information. Inaccurate, incomplete or illegible information will delay processing.

SECTION 1

Name: (Last, First, Middle Initial)	Social Security Number:	Date of Birth: (00/00/0000)	
Mailing Address	City	State	Zip

SECTION 2

(This section MUST be completed by the school district, charter school or BOCES)

- Please neatly print, type or attach a label in the box below with the name and mailing address of the fingerprint contact person of the school district, charter school or BOCES.
- This form will be returned to the person identified below if SED has no fingerprint application on file for the above individual as of the "OSPRA Processing Dates."
- Make no other marks in the box below or the box to the right of this space.

OSPRA Processing Dates

Spackenkill Union Free School District
 15 Croft Road
 Poughkeepsie, NY 12603

(leave blank)

First 6 digits of school BEDS or CS-ID #:
 Charter Schools: Please contact OSPRA to obtain your specific CS-ID number:

131602

Title of position employee will be placed in:

Signature of employer representative or fingerprint contact person:

Date:

Telephone # of fingerprint contact person:

Deidre A. Castrano

845-463-7800

SECTION 3

- I have read "Fingerprinting Information and Instructions" issued by the State Education Department and (SED) have previously submitted fingerprints to SED pursuant to the SAVE legislation.
- I understand that if I have any questions about my rights, I may contact the OSPRA office at (518) 473-2998.

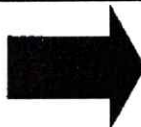
I hereby authorize the Commissioner of Education to review my criminal history record as secured from DCJS and the FBI for the purposes of conducting a determination on a Clearance for Employment as a condition for my new employment. I understand that the Commissioner will forward such final determination to my prospective employer in accordance with Part 87 of the Commissioner's Regulations. I further understand that once the Clearance for Employment is issued, the Commissioner of Education is authorized to forward certain information regarding any subsequent criminal history notifications from DCJS to my new employer

Signature:

Date:

SECTION 4

Mail
 completed
 OSPRA 102 to:



Spackenkill UFSD
 Human Resources
 15 Croft Road
 Poughkeepsie, NY 12603



Book	POLICY BOOK
Section	4000 PERSONNEL
Title	Substitute Teacher Pay
Code	4114.1
Status	Active
Adopted	December 9, 1985
Last Revised	January 21, 2020
Last Reviewed	October 1, 2012

Beginning 2020 updated rates will be approved annually by the Board of Education at the July Re-organizational Meeting

When an employee begins his/her third consecutive year of resident substitute status, he/she will receive an additional \$5 per day.

Certified Teacher: \$105 per day

In order to receive the certified rate, proof of your certification is required.

Uncertified Teacher: \$90 per day

Registered Nurse: \$150 per day

Substitute teacher assistants, aides, monitors and clerical: \$12.50 per hour

As of July 1, 2001, the State Education Department has required us to fingerprint any potential employees working for the Spackenkill Union Free School District. If you have not had them done, you will be contacted to make arrangements to have your fingerprints taken.

Return the entire packet to the District Office at the address at the top of the application.