

KESHEQUA CENTRAL SCHOOL DISTRICT

15 Mill Street, P.O. Box 517 Nunda, New York 14517 Ph: 585-468-2541 Fax: 585-468-3814

PROFESSIONAL STAFF APPLICATION

The Keshequa Central School District does not discriminate because of race, color, creed, religion, national origin, political affiliation, sex, sexual orientation, age, marital status, military status, veteran status, or disability.

71	144 - 141 - C	POSITION PR		
Elementary	Middle S	School _	High School 🔲	Other [] (Guidance,
Full-Time	Part-Tir	ne 🔲		Psychology, Administrator)
Please specify p	references: Grad	de Level		_
Subject Areas		_		_
		PERSONAL IN	FORMATION	
Name				
Ivanic	Last	First	t	M.I.
Other Name(s) _			mation regarding names work or school record	you have used, which may las.
Present Mailing	Address		Pho	one
Social Security	#	N.Y.S	S. Teachers' Reti	rement#
			CERTIFICATION f all certifica	ites
N.Y.S. Certifica	tion: Yes I	No Pending	If yes or pendi	ng please complete:
Area		Subj	ect	
☐ Initial [Professional	Transition	al Provisiona	al Permanent
Effective Date	Expirati	ion Date	Certificat	ce #
Area		Subje	ect	
☐ Initial	Professional	Transition	al Provisiona	al Permanent
Effective Date	Expirati	ion Date———	Certificat	ce #
New York State C	coaching Certific	cate 🔲 Yes	□ No	Pending

EDUCATION AND PROFESSIONAL TRAINING

School Attended	Location	Dates	Degree	Major	Minors
High School					
Undergraduate					
Graduate					
Total Number of					
Graduate Hours					
beyond last degree					

TEACHING EXPERIENCE

List most recent experience first. Include any substitute teaching and indicate as such. Administrative applicants: please include both administrative and teaching experience.

Inclusive	e Dates:	Name and Location of School	Specific Nature of Position: i.e., grade level, subject, etc.	Total Years	If full- time position, annual salary	Did you receive tenure?
From	To					
1.						
2.						
3.						
4.						

Reason for Leaving (Refer to numbers above)	Reason for Leaving (Refer to numbers above)
1.	2.
3.	4.

EDUCATIONAL EXPERIENCE

If fewer than 3 years of regular full-time employment, include student teaching experience here.

Inclusive Dates:			
From	То	Name and Location of School	Subject or Grade Level
1.			
2.			

RELATED PROFESSIONAL EXPERIENCE

Educational travel, lectures, addresses, publications, organizational memberships, committee chairs or memberships, participation in educational experiences, innovations, special programs, elective positions held. This section should include your experience with computers and technology as organizational tools (i.e., word processing, spreadsheets, database) to instructional delivery (i.e., Internet, CD Rom multimedia, distance learning).

MILITARY SERVICE AND WORK EXPERIENCE OTHER THAN TEACHING

List here in chronological order all practical experience other than teaching, including trade or business experience, military service, social work, work in summer camps, involvement with youth activities, etc.

	Inclusive Dates					Name and Address of	Superviso	or who
Kind of Work	From	То	Name a	nd Address o	of Employer	would know most abo		
	2 2 3 111	10						
List below an	y extracı	urricular c	or athlet	cic activiti	es you can d	irect.		
		dance at w			the last t Good	hree years (days, w		nths) Poor
to accept a	discipl avoid a	inary pena denial of	alty in f tenure	settlement or dismis	of discipl	ever agreed to resinary charges? Have a probationary peri	you eve	r
employer to	respond	to refere	lations,	ecks by pro	spective em	miting the right of aployers? If yes, plo	ease exp	
the case of principals a	experient on the ching s	nced teach r supervis upervisors	ners or sors are	supervisor preferred ferences m	your work a s, present . Beginning ay not be c	as a teacher or as a and former superint teachers will plead contacted before a co	endents, se inclu	ıde
Name		Offici Positi	_	Pr€	esent Addre:	ss/Zip/Phone	Offi Sent	ce Use Rec'd
	T							

Keshequa Central School	state why you feel you are well qualified for employment with the District and any additional professional information that you in our considering you for a position.

Thank you for completing this application and for your interest in Keshequa Central School.

Please return application to:

Superintendent Keshequa Central School P.O. Box 517 Nunda, New York 14517



I hereby certify that the statements made in this application are true to the best of my knowledge and belief. I hereby authorize any individual, company, or institution with whom I have been associated to furnish the Keshequa Central School District with any information concerning my employment.

Signature of Applicant