Bridgehampton Union Free School District

PO Box 3021, 2685 Montauk Highway, Bridgehampton, NY 11932 Telephone: (631) 537–0271 Facsimile: (631) 537-9038

1. POSITION: Support Starr Date: 1/1/03
Teaching: <enter area="" subject=""></enter>
Teaching Assistant: <enter area="" subject=""></enter>
Administrative: <enter position="" subject=""></enter>
II. PERSONAL INFORMATION:
Name:
Mailing Address:
Telephone #: Home () - Work: () - Cell: () -
Social Security Number:
Have you ever been convicted of a crime?
If yes, Explain:
FOR OFFICE USE ONLY
□ Completed Application/cover Letter □ Reference Check □ Copy of certification (s) □ Interview □ Two letters of reference □ IT-2104 □ Transcripts □ I-9 Verification □ W-4
Date: Initials:
Comments:
FOR OFFICE USE ONLY
III. Certification/License
Driver's license Number: State:
IV. EDUCATIONAL PREPARATION
Vocational/Technical/ Trade: : <enter and="" location="" name="" of="" school=""></enter>
Course of Study: <enter course="" of="" study=""></enter>
Degree: <enter degree="" information=""></enter>
Year of Graduation: <enter graduation="" of="" year=""></enter>
High School: <enter and="" high="" location="" name="" of="" school=""></enter>
Course of Study: <enter course="" high="" of="" school="" study=""></enter>

Year of Graduation: <Enter Year of High School Graduation>

Bridgehampton Union Free School District PO Box 3021, 2685 Montauk Highway, Bridgehampton, NY 11932

Telephone: (631) 537–0271 Facsimile: (631) 537-9038

College: <Enter Name and Location of College>

Course of Study	: <enter th="" underg<=""><th>rad. Course of S</th><th>Study</th><th>></th><th></th><th></th><th></th><th></th><th></th><th></th><th></th><th></th></enter>	rad. Course of S	Study	>								
Degree: <enter i<="" td=""><td>Degree Information</td><td>on></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></enter>	Degree Information	on>										
Year of Graduat	ion: <enter th="" yea<=""><th>r of College Gra</th><th>duati</th><th>on></th><th></th><th></th><th></th><th></th><th></th><th></th><th></th><th></th></enter>	r of College Gra	duati	on>								
V. EXPERIEN	CE											
List most recent expe	rience first, include	any substitute or	part t	ime tea	ching,	and ind	icate as s	such				
Employer's Nan	ne and Address	s:										
Specific Nature	of Position:											
Reason for Leav	ving:											
Employer's Nan	ne and Address	s:										
Specific Nature	of Position:											
Reason for Leav	ving:											
Employer's Nan	ne and Address	s:										
Specific Nature	of Position:											
Reason for Leav	ring:											
VI. Were you ever f	ired from a jol	o?∏Yes □]No									
If yes, what was	the reason giv	en to you:										
VII. REFEREN	NCES:											
List four individ	luals having pe	ersonal knowl	edge	e of y	our p	rofess	sional t	rainin	g, ab	ility, e	experi	ence
and personal cha	aracter. Includ	le the name, a	ıddre	ess, aı	ıd tel	ephon	ne num	ber of	your	· last s	superv	isor
who may be con	ntacted for pers	sonal or profe	ssio	nal re	feren	ice.						
1. Name:	Position:	Phone: ()	-								
Address:												
2. Name:	Position:	Phone: ()	-								
Address:												

Bridgehampton Union Free School District

PO Box 3021, 2685 Montauk Highway, Bridgehampton, NY 11932 Telephone: (631) 537–0271 Facsimile: (631) 537-9038

3. Name:	Position:	Phone: ()	-
Address:				
4. Name: Address:	Position:	Phone: ()	-
May we conta	act your present	employer?:] Ye	es 🗌 No
May we conta	act your former	employer(s)?:		Yes No
Present Emple	oyer Contact Na	ime:		
Former Emplo	oyer Contact Na	ime:		
	-			curately describes my employment history.