

Office Use Only

Interview _____
Ref. Check _____

Fayetteville-Manlius School District

8199 East Seneca Turnpike
Manlius, NY 13104-2140
Telephone (315) 692-1234
www.fmschools.org

Application for Teaching Assistant Position

(PLEASE PRINT OR TYPE, USE BLACK INK)

PERSONAL DATA

Name _____
Last First Initial

Present Address _____

City _____ State _____ Zip _____ Telephone _____

Cell Phone _____ Email address _____

EDUCATION

Name of Schools Attended

Length
of Time

Graduated
Yes or No

Course/Degree
Hours

High School _____

College _____

Other _____

CERTIFICATIONS* (include a copy of any certificates)

Type of Certificate (Be Specific)

State

Date Issued

If not yet certified, check any certification steps completed: (include copies of verification of test/coursework)

NYS Assessment of TA Skills Test _____ Child Abuse Recognition Course _____

School Violence Prevention Course _____ DASA _____

TA Skills Test please indicate date taken _____

CHECK LEVELS APPLYING FOR:

CHECK AREAS APPLYING FOR:

_____ Elementary School
_____ Middle School
_____ High School

_____ Special Education
_____ Computer Science
_____ Kindergarten, First Grade
_____ Other

Are you willing to do substitute teaching assistant work? Yes _____ No _____

Are you willing to do substitute secretarial work? Yes _____ No _____

Have you ever been fingerprinted? Yes _____ No _____

Have you had your fingerprints submitted to the NY State Education Department? Yes _____ No _____

Have you ever been convicted of a crime? Yes _____ No _____

If yes, explain _____

Have you ever submitted an application to the Fayetteville-Manlius School District? Yes _____ No _____

If so, for what position? Position _____ When _____

Have you ever been employed by the Fayetteville-Manlius School District? Yes _____ No _____

If yes, state date and position _____

FORMER EMPLOYMENT (List most recent employer first)

Employer _____ Start Date _____ End Date _____

Position _____ Reason for Leaving _____

Job Duties _____

Employer _____ Start Date _____ End Date _____

Position _____ Reason for Leaving _____

Job Duties _____

Employer _____ Start Date _____ End Date _____

Position _____ Reason for Leaving _____

Job Duties _____

REFERENCES

Name _____ Position _____

Email _____ Phone _____

Name _____ Position _____

Email _____ Phone _____

Name _____ Position _____

Email _____ Phone _____

ADDITIONAL SKILLS WHICH MAY QUALIFY YOU FOR THIS POSITION

REQUIREMENTS: NYS requires applicants to have fingerprint clearance. All associated fees are payable by the applicant. Districts are required to first hire applicants in the certification process (see District information sheet or go to www.highered.nysed.gov/tcert/)

The Board of Education requires proof of citizenship or immigration status as a condition of employment.

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.

DATE

APPLICANT'S SIGNATURE

THE FAYETTEVILLE-MANLIUS SCHOOL DISTRICT IS AN EQUAL OPPORTUNITY EMPLOYER.
The Fayetteville-Manlius School District does not discriminate on the basis of race, color, religion, sex, gender identity, sexual orientation, pregnancy, status as a parent, national origin, age, disability, family medical history or genetic information, political affiliation, military service, or other non-merit based factors in the educational programs and activities which it operates.