Sachem Central School District
51 School Street
Ronkonkoma, NY
631-471-1310

Please indicate position(s) for which you are applying.

Substitute Positions	Part Time Positions	Full Time Positions
☐ Aide	☐ Food Service Worker	☐ Aide
☐ Clerical	☐ Hall Monitor	☐ Bus Driver
☐ Custodian	☐ Office Aide	☐ Custodian
☐ Food Service Worker		☐ Food Service Worker
		☐ Maintenance
		☐ Security
		☐ Clerical *

must be on Civil Service list

Personal Information

Name:_____
Last First Middle

Address:_____
Number Street City State Zip

Home Telephone: (____)_____ Cell Phone:_____

Hours Available:_____ Social Security Number:_____

Education

	Name of School	Location	Dates Attended	Degree Earned
High School				
College				
Other				

Employment History

Dates of Employment	Name of Employer	Address	Title	Reason for leaving

The Sachem Central School District is an equal opportunity employer and does not discriminate on the basis of age, national origin, race, religion, sex, or disability.

References

Please include the name, address and phone number of your immediate supervisor in current or last held position.

Name of Reference	Address	Phone Number	Relation to You

General Information

Have you previously worked for the Sachem Central School District? Yes No

If Yes, what when were you employed and what title did you hold?_____

_____

Have you ever worked for an organization contracted with the Sachem Central School District? Yes No

If Yes, what when were you employed, what company, and what title did you hold?_____

_____

Do you have any relatives currently employed by the Sachem Central School District? Yes No

If Yes, who is employed and what title do they hold?_____

_____

Have you ever been convicted of a crime? Yes No

If Yes, please provide additional information_____

_____

Is there anything that prevents you from fulfilling the responsibilities of the position(s) you applied for?

Yes No

If yes, please explain_____

_____

Additional comments or information you wish to share:_____

_____

I declare that statements made in this application have been examined by me and to the best of my knowledge are true and accurate. I hereby authorize the Sachem Central School District at Holbrook to make any and all investigation of my background deemed necessary. I further authorize my former employers to supply any information regarding employment history and any other relevant information regarding my performance of my responsibilities. I understand that this application will be kept on file for a period of six (6) months.

_____ _____

Signature Date

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