



# NORTHERN ADIRONDACK CENTRAL SCHOOL

P.O. Box 164  
5572 Rt. 11  
Ellenburg Depot, NY 12935

Telephone: (518) 594-7060

Fax: (518) 594-7255

## NON-INSTRUCTIONAL EMPLOYMENT APPLICATION

**Full Time**

**Part-Time**

**Substitute**

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Last Name

First

Middle

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Position Applying For

### Directions:

1. Complete the separate supplemental *Clinton County Department of Personnel Application for Examination or Employment* and attach to this application.
2. Attach copy of your:
  - a. High School Diploma, GED or College Transcripts,
  - b. Drivers License, and
  - c. If required, copies of additional certificates.
  - d. Three letters of recent recommendations
3. Fingerprint Clearance For Employment

Have you ever been fingerprinted?  Yes  No

If **yes**, state reason:

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Please Note: The Schools Against Violence in Education (SAVE) Legislation requires the Commissioner of Education to conduct Fingerprint supported criminal history background checks for all school personnel, including applicants for certification, in addition to all prospective employees of school districts. If you have not filed with the State Education Department for clearance for employment and you are offered a position, fingerprinting will be arranged by the school district.

**4. INDEMNIFICATION**

I understand that the Northern Adirondack Central School District will make an extensive inquiry regarding my background and experience, and I hereby release from any liability anyone giving information regarding me (whether specified in my application or not) so long as the information given is relevant to the duties for which I have applied. I understand that information gathered, in part or whole may be shared with members of the school district involved in the search process. If requested, I will sign individual releases. I further understand that all information gathered by the district regarding my application will be the property of the school district and will not be released to me unless required by Federal or State statutes or regulation.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**5. ATTESTATION**

I hereby affirm that the information provided within this application and attached thereto is true and correct to the best of my knowledge.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

Willful misrepresentation of a fact may result in dismissal of an applicant hired or retained by the school district.

The Northern Adirondack Central School District, in compliance with Title IX of the Education Amendments of 1972 and Regulation 504 of the Rehabilitation Act of 1973, does not discriminate on the basis of race, creed, color, sex, age, national origin, handicap, veteran status, sexual orientation, or other protected class per law.

PLEASE RETURN COMPLETED APPLICATION TO:

Mr. James C. Knight Jr.  
Superintendent of Schools  
Northern Adirondack Central School  
P.O. Box 164  
Ellenburg Depot, NY 12935

Please send all materials to the *Office of the Superintendent of Schools* at the above address