



The CHARLTON School

322 Lake Hill Rd. Burnt Hills, NY 12027 Phone (518) 399-8182 Fax (518) 399-8195

APPLICANT INFORMATION											
Last Name			First			M.I.		Date			
Street Address						Apartment/Unit #					
City			State		ZIP		Home #		Cell #		
E-mail Address					Do you have a NYS Driver's License?		Yes () No ()		Social Security #		
Availability		Full-Time () Part-Time ()		Can you work?		S M T W T F S		If Part-Time, What hours/days?		Days: Hours:	
Position Applied for						When can you start?					
Are you a citizen of the United States?			YES <input type="checkbox"/>		NO <input type="checkbox"/>		If no, are you authorized to work in the U.S.?			YES <input type="checkbox"/> NO <input type="checkbox"/>	
Have you ever worked for this company?			YES <input type="checkbox"/>		NO <input type="checkbox"/>		If so, when?				
Have you ever been convicted of a felony?			YES <input type="checkbox"/>		NO <input type="checkbox"/>		If yes, explain				
EDUCATION											
High School			Address								
From		To		Did you graduate?		YES <input type="checkbox"/>		NO <input type="checkbox"/>		Degree	
College			Address								
From		To		Did you graduate?		YES <input type="checkbox"/>		NO <input type="checkbox"/>		Degree	
Other			Address								
From		To		Did you graduate?		YES <input type="checkbox"/>		NO <input type="checkbox"/>		Degree	
Teaching Certifications or Licenses:											
PERSONAL REFERENCES											
<i>Please list three personal references.</i>											
Full Name					Relationship						
Email						Phone					
Home Address											
Full Name					Relationship						
Email						Phone					
Home Address											
Full Name					Relationship						
Email						Phone					
Home Address											



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CURRENT EMPLOYMENT			
Company		Phone	
Address		City/State/Zip	
Job Title		Supervisor	
Responsibilities			
From	To	Reason for Leaving	
May we contact your supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/>			
PREVIOUS EMPLOYMENT			
Company		Phone	
Address		City/State/Zip	
Job Title		Supervisor	
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/>			
Company		Phone	
Address		City/State/Zip	
Job Title		Supervisor	
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/>			
Company		Phone	
Address		City/State/Zip	
Job Title		Supervisor	
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/>			
Additional Trainings or Special Skills:			
MILITARY SERVICE			
Branch		From	To
Rank at Discharge		Type of Discharge	
If other than honorable, explain			
DISCLAIMER AND SIGNATURE			
I certify that my answers are true and complete to the best of my knowledge.			
If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.			
Signature			Date