

Have you ever been fired or asked to resign any former position? _____
If yes, where?

REFERENCES: Will be checked. Use full, correctly spelled names, complete Street, City, State and ZIP plus Area Code and Telephone Number. List employers under whom you have worked and others who have first-hand knowledge of your character, personality and abilities. Personal references should be other than family.

Name / Title	Place of Employment / Address	Telephone

EARLIEST DATE YOU WOULD BE ABLE TO BEGIN WORK: _____

I understand that misrepresentation or omission of facts called for in this application is cause for cancellation of the application and/or immediate dismissal from the Sullivan County School Districts and/or Sullivan County BOCES, if employed. My signature below authorizes Sullivan County School Districts and/or Sullivan County BOCES to request references and release information regarding my qualifications from those people I have listed in my application. I also give permission to any listed employer to submit references upon the School District and/or BOCES' written request.

Applicant's Signature

FOR OFFICE USE ONLY:	
Applicant interviewed by: _____	Date _____
