

**APPLICATION FOR  
SUPERINTENDENT OF SCHOOLS  
*BARKER CENTRAL SCHOOL DISTRICT***

**Applicant's Name:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**PERSONAL DATA**

Name: \_\_\_\_\_

Present Address: \_\_\_\_\_

E-mail Address: \_\_\_\_\_ Citizen: Yes  No

Phone (Home): \_\_\_\_\_ (Office): \_\_\_\_\_

Present Position: \_\_\_\_\_

School District Size (K-12 student enrollment): \_\_\_\_\_

Type of District (e.g., Central, City): \_\_\_\_\_

Number of Employees: Teaching: \_\_\_ Administration: \_\_\_ Support: \_\_\_

Current Budget: \_\_\_\_\_

BOCES District (if applicable): \_\_\_\_\_



## OTHER WORK EXPERIENCE

Firm	Type of Work	Address & Phone #	Dates	Immediate Supervisor

## MILITARY SERVICE

Branch	Rank	Duties	Dates	Type of Discharge

## SPECIAL INTERESTS (Community Affiliations, Professional Affiliations)

## REFERENCES (Please list four persons that know your professional work and qualifications)

Name	Position	Work Phone	Home Phone

Note: Your present Board of Education members will not be contacted until you become a finalist (one of 2 or 3 applicants) unless you authorize us to make such a contact now; if so, please note above. Other references will be contacted if you are chosen for a first round interview.

**PROFESSIONAL PREPARATION** (Undergraduate and Graduate Study)

Institution	Major/Minor	Degree	Graduation Date

**CERTIFICATION**

Title of Certificate	Date Issued	Permanent or Provisional	State Valid In	Certificate Number

**TEACHING EXPERIENCE** (most recent first)

Subject/Grade	School/School District	Address & Phone Number	Dates Employed	Immediate Supervisor

**ADMINISTRATIVE EXPERIENCE** (most recent first)

Title	School/District Name	Address & Phone Number	Dates Employed	Highest Salary

Since your 16<sup>th</sup> birthday, have you ever been convicted of, or pleaded guilty to a crime? (Do not include traffic violations for which a fine of \$200 or less was imposed). Yes  No

If yes, state the charge, place and approximate date, and the resultant action:

A conviction will not necessarily disqualify an applicant from consideration for employment.

The material, information, and/or other data obtained, collected or sought during the search process is the property of the local school district and may be shared with persons engaged in the search proceedings. This information may be subject to inquiry by the consultant as he/she conducts a study of the background, experience, and educational activities of the candidates. Accordingly, I agree to release from liability those persons giving information about me so long as the information is related to the responsibilities, duties and/or functions of the position for which I have applied. I understand that none of the information, noted above, will be available to me except as may be required under state or federal laws and regulations. I also understand that willful misrepresentation of any actual fact contained in this application is cause for disqualification of my candidacy for the position or if hired or retained, dismissal from the position and loss of tenure rights.

\_\_\_\_\_  
*Date*

\_\_\_\_\_  
*Applicant's Signature*

**E-Mail Application to: [WDSilky@aol.com](mailto:WDSilky@aol.com)**

**Mail or Fax this page with signature to:**

**Mailing/Faxing Instructions**  
**Dr. William D. Silky/Dr. Suzanne Gilmour**  
**Castallo & Silky**  
**P.O. Box 15100**  
**Syracuse, New York 13215**  
**Fax: 315-492-4474**