

ne Ridge, NY 12484 845: 687-5000 fax 845: 687-5083

Application for a Teaching Position

Name	
Name(Dr., Mr., Mrs., Ms., Miss)	A. I am applying to teach: (Subject or subject area)
Address	_
Social Security #	B. I am applying for: (Please check)
Alternate address, if different from above (with inclusive dates, if applicable)	Full-time
	Part-time
	Day Evening
	(If newspaper, please specify name of
Telephone	
Area Code Home Number	-
Best time(s) to call	-
May we call you at work? Yes No	
Area Code Number	
Best times(s) to call	

Employment History a) Present academic position	on: school or college			
Title or rank		Date From	То	
Duties or subjects taught				
Reason for desiring to leave_				
Previous academic positions held and dates: (Please list chronologically from the most recent. Include title, employer, addre date, from/to. If part-time, list hours)				
c) Non-academic positions Employer	held: Address	Position	Date (From/To)	
Current				
Previous				
Previous				
Educational Background			Degree or hrs.	
a) College	Location	Major	Completed	
b) Research, thesis or disse	rtation titles:			
	Title or rank Duties or subjects taught Reason for desiring to leave Annual salary at present Previous academic positions hadate, from/to. If part-time, lister to be academic positions be academic positions be academic positions be academic positions. Employer Current Previous Educational Background a) College	Title or rank	Title or rank Date From Duties or subjects taught	

ist of community college-level c graduate study and/or teaching o	ourses in your subject area(s) whexperience:	nich you are adequately prepar	ed to teach because of
eferences: (Please give names of t ther employment references only)	three persons who are familiar with	your probable success as a colleg	e teacher. List recent acado
Name/Official Position	Institution	Address	Zip Code
) If you have reference stateme	nts on file in a college or university	placement bureau, please give:	
	nts on file in a college or university Address	placement bureau, please give:	Zip Code
o) If you have reference stateme		placement bureau, please give:	Zip Code
ame of Institution	Address Jld support his application, such as		
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11.	Please comment on your philosophy of teaching experience are appropriate to community colle	g, your estimation of your teaching ability and why you feel your educational preparation and ge teaching:
I aff	irm that the statements on this application (inc	luding attachments) are true. Falsifications are reason for dismissal.
Date		Signature

Please read carefully before signing.

I understand that neither the completion of this application nor any other part of my consideration for employment establishes any obligation for SUNY Ulster to hire me. If I am hired, I understand that either SUNY Ulster or I can terminate my employment at any time and for any reason, with or without cause and without prior notice. I understand that no representative of SUNY Ulster has the authority to make any assurance to the contrary.

attest with my signature below that I have given to SUNY Ulster true and complete information on this applicate No requested information has been concealed. I authorize SUNY Ulster to contact references and prior employers imployment reference checks. If any information I have provided is untrue, or if I have concealed material information, I understand that this will constitute cause for the denial of employment or immediate dismissal.	
Signature	Date

THIS APPLICATION IS VALID ONLY FOR 60 DAYS FROM THE DATE SIGNED/DATED ABOVE.

SUNY Ulster is an equal opportunity employer. SUNY Ulster does not discriminate in employment on account of race, color, religion, age, national origin, citizenship status, sex, sexual orientation, marital status, physical or mental disability, military status or unfavorable discharge from military service.

Please return this application and all support materials to:

Human Resources
Ulster County Community College
Stone Ridge, NY 12484