

APPLICATION FOR SUPERINTENDENT OF SCHOOLS

TUPPER LAKE CENTRAL SCHOOL DISTRICT
TUPPER LAKE, NEW YORK 12986

1. Complete this application form and forward to:
Stephen T. Shafer, District Superintendent
Sole Supervisory District of Franklin-Essex-Hamilton Counties
P.O. Box 28
Malone, New York 12953
2. You are invited to attach any additional supporting information and/or to enclose other materials for consideration.
3. Request that your college or university placement office mail a copy of your confidential folder to the above address.
4. You will be contacted if an interview is to be held.
5. The Tupper Lake Central School District does not discriminate on the basis of race, creed, color, national origin, age, marital status, disability or gender.
6. Application materials must be submitted no later than **May 16, 2008**.



Please Print or Type

PERSONAL INFORMATION

Last Name: _____ First Name: _____ Middle Name: _____

Business Address: _____ Telephone: _____

_____ Zip Code: _____

Home Address: _____ Telephone: _____

_____ Zip Code: _____

Present Position: _____ Current Salary: _____

Type of Organization or School District: _____

Personnel Responsible To You: _____ Number of Teachers: _____ Others: _____

PROFESSIONAL PREPARATION

Institution and Location	Major/Minor	Degree

Do you presently possess or are you eligible for a certificate valid in New York State for the position of Superintendent of Schools (School District Administrator)?

Yes No

If you hold such a certificate, please attach a photocopy.

Other certificates held:

Title of Certificate	Valid in the State of:

Employment History

List all experience in REVERSE chronological order. Include both school and non-school experience, also any military service.

Institution or Activity and Location	Title of Position	Years From/To	Size/Unit

References

Please list at least four professional references who, during the past five years, are knowledgeable as to your educational or other experience.

Name:	Title:
Address:	Telephone:
	Zip Code:

Name:	Title:
Address:	Telephone:
	Zip Code:

Name:	Title:
Address:	Telephone:
	Zip Code:

Name:	Title:
Address:	Telephone:
	Zip Code:

I have requested my placement file be forwarded from: _____
Name of Institution

SIGNATURE: _____ **DATE COMPLETED:** _____

1. How would your previous experiences and knowledge help you provide leadership for the instructional program and management of the District?

2. Describe briefly why you are interested in being the Superintendent at Tupper Lake Central School District? What would you hope to accomplish in this District?