

SUSQUEHANNA VALLEY



CENTRAL SCHOOL DISTRICT
Assistant Superintendent

P.O. Box 200 Conklin, New York 13748

Phone (607) 775-9146
Fax (607) 775-4575

Dear Instructional Personnel Applicant:

Thank you for your inquiry regarding instructional opportunities within the Susquehanna Valley Central School District and/or your interest in a current vacant position.

In order to be considered for an interview for a posted/advertised position, the following documents must be received by my office on or before the deadline date for application:

- **Letter of Interest**
- **Résumé**
- **Instructional Personnel Application**
- **Copy of N.Y.S. Certification(s)**
 - *Printed from the NYSED TEACH website, if necessary*
- **Three Letters of Recommendation**
- **OFFICIAL College Transcripts**

An Instructional Personnel Application is included with this letter. Please send your application materials to the following address:

Catherine Kacyvenski, Assistant Superintendent
Susquehanna Valley CSD
P.O. Box 200
Conklin, NY 13748

You may hand-deliver your application to the **District Office**, which is located in the High School building, 1040 Conklin Road, Conklin, NY 13748.

Please Note: New York State law requires that all personnel hired must be fingerprinted for employment and processed through the Office of School Personnel Review and Accountability (OSPRA), NYS Education Department. If you have not obtained your fingerprint clearance as part of your certification requirement, this must be completed prior to your appointment to the Board. Fingerprinting information and instructions are included within this packet.

Thank you for your interest in becoming part of our school community!

Yours truly,
Catherine Kacyvenski
Assistant Superintendent

Attachment

September 14, 2022

FINGERPRINTING

INFORMATION & INSTRUCTIONS

New York State has implemented a Statewide Vendor Managed System, "SVMS," for all fingerprinting for civil purposes in state agencies, including for New York State public school employment. New York State has contracted with one vendor, **MorphoTrust**, to provide this service.

- You must make an appointment, online or by phone, to have your fingerprint scanning done.
- The closest location for appointments is located at 236 Chenango St, Suite A, Binghamton
- There are **ABSOLUTELY NO WALK-INS** at any of the locations.

TO SCHEDULE YOUR FINGERPRINTING APPOINTMENT, FOLLOW THESE STEPS:

▶ Go to the **MorphoTrust** website at www.identogo.com

- Enter zip code, a map will come up of Identogo locations. Choose a location and follow directions to schedule an appointment.

▶ **OR:** Call (877) 472 - 6915

▶ You will be asked for a Service Code

- The **Service Code** for fingerprinting for employment in public schools is: **14ZGR7**

▶ The fee is: **\$101.75**

Breakdown as follows:

- DCJS fee: \$75.00
- FBI fee: \$13.25
- MorphoTrust fee: \$13.50
- **TOTAL FEE** **\$101.75**

▶ **On-Site Payment Methods:**

- **CREDIT CARD, CHECK or MONEY ORDER ONLY**

**** SAVE YOUR RECEIPT FOR THE FEE****

▶ **Identification Required at Time of Appointment:**

- Bring two (2) forms of identification – one (1) must contain a photo.

▶ **VERY IMPORTANT:** You **MUST** call the Office of the Assistant Superintendent, at **607-775-9146**, and give the **DATE** that you were fingerprinted. Susquehanna Valley will obtain your clearance from the New York State Education Department / TEACH website, usually within 24-48 hours.

For Susquehanna Valley Educational Support Staff Association (SVESSA) ONLY:

Per the SVESSA contract: After six (6) months of permanent employment, the Susquehanna Valley Central School District will reimburse the fingerprinting fee to the employee.

Keep your receipt in a safe place. After 6 months of employment, please request a FP Reimbursement form from the Assistant Superintendents Office. Send your receipt and the reimbursement form back to the Assistant Superintendent's Office. After processing, the reimbursement check will be sent to you.

NEW YORK STATE CERTIFICATION(S): YES NO

Certification Area:	<input type="checkbox"/> Initial	<input type="checkbox"/> Professional	Effective Date:
		<input type="checkbox"/> Permanent	
Certification Area:	<input type="checkbox"/> Initial	<input type="checkbox"/> Professional	Effective Date:
		<input type="checkbox"/> Permanent	
Certification Area:	<input type="checkbox"/> Initial	<input type="checkbox"/> Professional	Effective Date:
		<input type="checkbox"/> Permanent	

Enclose copies of ALL certifications / or verification from the N.Y.S. Education Dept., that your certification is forthcoming.

If **CERTIFICATION** status is **NO**, or **PENDING**, explain:

TENURE

- Have you ever been GRANTED tenure: YES NO
- *Please provide proof of granted tenure w/application
- Have you ever been DENIED tenure: YES NO

If YES, please list Tenure Area(s):

****Please provide proof of granted tenure with application**

EDUCATION

Name & Location of Institution	Major	Minor	Diploma, Degree, or No. of Credit Hrs. Completed
High School:			
College(s):			
Graduate Studies:			

Scholastic Honors: _____
High School
College
Graduate School

Check scholastic average of all college work: **A** **A-** **B** **B-** **C** **C-**

Check scholastic average in major field: **A** **A-** **B** **B-** **C** **C-**

EDUCATIONAL EXPERIENCE

List in chronological order from most recent position– include student teaching:

DATES		NAME & LOCATION OF SCHOOL	
From	To	Name ▶	
		Address ▶	
▼ Position ▼		Describe ▶ Position	

DATES		NAME & LOCATION OF SCHOOL	
From	To	Name ▶	
		Address ▶	
▼ Position ▼		Describe ▶ Position	

DATES		NAME & LOCATION OF SCHOOL	
From	To	Name ▶	
		Address ▶	
▼ Position ▼		Describe ▶ Position	

DATES		NAME & LOCATION OF SCHOOL	
From	To	Name ▶	
		Address ▶	
▼ Position ▼		Describe ▶ Position	

RELATED PROFESSIONAL EXPERIENCE

Educational travel, lectures, addresses, publications, professional memberships, participation in educational experiments, innovations, special programs, community service:

--

OTHER WORK EXPERIENCE (include summer work):

DATES		EMPLOYER	
From	To	Name ▶	
		Address ▶	
▼ Position ▼		Duties ▶	

DATES		EMPLOYER	
From	To	Name ▶	
		Address ▶	
▼ Position ▼		Duties ▶	

DATES		EMPLOYER	
From	To	Name ▶	
		Address ▶	
▼ Position ▼		Duties ▶	

List any extracurricular activities that you would be willing to facilitate or coach:

--

List any periodicals and newspapers that you read on a regular basis, as well as any books that you have read during the past year:

--

List any hobbies and/or other interests:

--

REFERENCES

List the names of four persons who have observed your work as a teacher or as a student:

Name		Address	
Official Position			
Educational Institution		Phone	

Name		Address	
Official Position			
Educational Institution		Phone	

Name		Address	
Official Position			
Educational Institution		Phone	

Name		Address	
Official Position			
Educational Institution		Phone	

List college or placement agency where your confidential record may be obtained:

--

PERSONAL STATEMENTS (SEE NEXT PAGE)

I certify that all information provided on this application is true and complete.

*Signature: _____

Date: _____

***Note: Application is not valid without signature**

New York State Law prohibits discrimination due to age, color, disability, national origin, race, religion, or sex.

- An Equal Opportunity Employer -

PERSONAL STATEMENTS

1. Describe your educational philosophy.

2. What do you want to accomplish as a teacher?

3. In your estimation, what are the most critical challenges facing education today and how will we overcome them?

Signature: _____

Date: _____