Office Use:	Recommended:	Packet 18-19#	OSPRA Clearance:	Emergency	Fina

## SUBSTITUTE REGISTRY NURSE APPLICATION

Substitute Coordination Service - Capital Region BOCES - [518] 464-5127

<u>BERNE KNOX WESTERLO ~ BETHLEHEM ~ BURNT HILLS-BALLSTON LAKE ~ BOCES ~ COHOES ~</u> <u>DUANESBURG ~ GREEN ISLAND ~ GUILDERLAND ~ MOHONASEN ~ NISKAYUNA ~ NORTH COLONIE ~</u> SCHENECTADY ~ SOUTH COLONIE ~ VOORHEESVILLE ~ WATERVLIET ~ WATERFORD-HALFMOON

## Albany and/or Schenectady County Civil Service applications also need to be completed

PLEASE PRINT OR TYPE - ALL QUESTIONS MUST BE ANSWERED

Name: Last		First		Middle
Address:				
City:				Zip Code
Telephone		Cell phon	e	
Email ————				
Social Security No	NY	S Retirement N	To	Tier/Date
Have you ever been convicted of a crir	me? □ No		f yes, please attach a	an explanation to this
New York State RN License	□ No	□ Yes I	f yes, provide copy	
LICENSE: NYS Registered Nurse License ‡	# 		Date	Issued
CPR Certificate			Date	Issued
Hepatitis B Vaccination - Date Admin	istered: 1)	2) _	3) _	
<b>REFERENCES</b> If you have not work	ted in a school set	ting, list reference	ees that can attest to yo	our ability to work with childr
Name & Position		Pres	sent Address	Telephone

The Albany-Schoharie-Schenectady-Saratoga BOCES and the districts participating in this service do not discriminate on the basis of race, color, national origin, creed, gender, age or disability as defined by law, and is in compliance with Title IX of the Education Amendments of 1972 and with Section 504 of the Rehabilitation Act of 1973. The compliance officer for Title IX and Section 504 is the Director of Human Resources who is available from 8 a.m. to 4 p.m. weekdays at 900 Watervliet-Shaker Road, Albany, N.Y., 12205. The phone number is (518) 862-4910

## **EDUCATIONAL PREPARATION**

Name and Location of College/University			y	Course of Study/Degree			Graduated		
							Yes	S	No
							Yes	3	No
EMPLOYME	NT EXPERIE	NCE Complete A	and B. Don	ot refer to a r	esume	in lieu of compl	eting this	section	<u>on</u>
A. Superviso	or at Last Place of	Employment	Location			Phone #		Date	sto
B. Employme	ent History:								
Current Em	ployer:								
	Address			Telephone					
Previous E	mployer:								
	Address					Telepho	one		
Previous Em	nployer:					_			
	Address					Telepho	one		
		T : 111:	14 41 1-		. 111.	-	<u> </u>		
DISTRICT SE		I am willing to w		_			_		
District	Alt.	High Schools	Midd	le Schools	Ele	mentary Schoo	ls		
BKW:		Secondary School			Elen	nentary School			
Bethlehem:		High School	Middle	School	Elen	nentary Schools			
BOCES:		Career and Tech:			Spec	cial Ed			
BHBL:		High School	Middle	School	Elen	nentary Schools			
Cohoes:		High School	Middle	School	Elen	nentary Schools			
Duanesburg:		Jr/Sr High School (g	grades 7-12)		Grad	les K-6			
Green Island:		Heatly School (grade	es 7-12)	Grades K-6	i				
Guilderland :		High School	Middle	School	Elen	nentary Schools			
Mohonasen:		High School	Middle	Schools	Elen	nentary Schools			
Niskayuna:		High School	Middle	School	Elen	nentary Schools			
North Colonie:	Goodrich	High School	Middle	School	Elen	nentary Schools			
Schenectady:	Steinmetz	High School	Middle	Schools	Elen	nentary Schools			
South Colonie:	CALC	High School	Middle	Schools	Elen	nentary Schools			
Voorheesville:		High School	Middle	School	Elen	nentary School			
Watervliet:		Jr/Sr High School (g	rades 7-12)		Grad	les K-6			
Waterford-Halfm	oon	Secondary School			Elen	nentary School			

WORK PREFERENCE: Levels:   High S	□ Middle S □ Elem S
I am available every day of the week.	
I am available only for the times periods noted below:	
Before NoonMondayTuesdayWe	dnesdayThursdayFriday
After NoonMondayTuesdayWee	dnesdayThursdayFriday
<b>NYSED FINGERPRINT INFORMATION</b> Pursuant to supported criminal history background checks.	o SAVE Legislation substitutes are subject to fingerprint
□ My fingerprints were/will be taken for the New York State E	ducation Department database on  Date
at Capital Region BOCES has Location	my permission to obtain clearance from NYSED.
I,	_, to the best of my knowledge
do not have pending criminal charges against me or of jurisdiction outside of NYS. *	criminal convictions in New York State or any
$\hfill\Box$ have pending criminal charges against me or crimina outside of NYS. *	al convictions in New York State or any jurisdiction
(List all pending criminal charges and convictions. Include the charged with or have been convicted. Attach additional pages i	
Signature	Date
*Note that a conviction record will not necessarily be a bar to e seriousness and nature of offense and rehabilitation will be take	
I hereby certify that the information supplied is true and correct. I aut for employment as may be necessary in arriving at an employment de part of this application constitutes cause for rejection of application or My signature below authorizes Capital Region BOCES to obtain infor I waive my right or access to any information submitted by references	cision. I understand that falsification of any dismissal after employment.  rmation regarding employment from my prior employers.
Signature	

RETIREMENT SYSTEM ELECTION NOTICE	Further information available at: <a href="www.osc.state.ny.us/retire">www.osc.state.ny.us/retire</a>
informed me that, as a matter of right, pursuant to Section 4 <b>New York State Employees Retirement System</b> . I further	
☐ I wish to join the Retirement System and have first district I substitute in. I must give my ERS# to all other	e been notified that I must give the ERS application to the r districts where I work as soon as I receive it.
☐ I do <u>not</u> wish to join the Retirement System	□ I am a retired member of NYS ERS
Signature REQUIRED	Date
Changes in your retirement status must be reported to distric	ct payroll office where you worked and to the substitute registry
<ul> <li>Update all application information as changes occur.</li> <li>Complete the online HazCom/BBP course through 90 days of approval by your 1st school district.</li> <li>Honor your job acceptances and report for work on nurse. Notify the Help Desk if you will be late.</li> <li>Dress appropriately as an adult role model for stude Expect the unexpected with flexibility.</li> <li>Follow the nurse's instructions.</li> <li>Treat all students and adults respectfully.</li> <li>Remain in the building until the specified time or not not use your cell phone, text or read the newspare.</li> <li>Do not use school computer for personal use.</li> <li>Maintain a safe environment by knowing emergence procedures for requesting help.</li> <li>Keep personal issues and beliefs to yourself. The state of the next class.</li> <li>At end of school day: sign out, return key, and leave</li> </ul>	Schoology, or attend a HazCom Right to Know/BBP Training within the designated day. Last minute cancellations leave school without a ents.  Otify a secretary or administrator if you must leave the building. Apper while in school, except on a designated break.  Expressed by procedures. Remain calm, avoid escalating conflicts. Learn school tudents are not your friends behave as the adult in charge. Expressed by the end of one class and the start of another. Arrive on time for the report for absent nurse.
	rom building administrators pertaining to your job performance, the chool/district substitute list. Three building DNU reports will BOCES substitute list.
	bstitute you are arrested or convicted of a crime, you must notify the ure to report an incident in writing will automatically remove a
Capital Region BOCES reserves the right to remove you f	from our registry at any time.
Signature	Date