

Application for the Position of Superintendent of Schools



Frewsburg Central School District

Frewsburg, New York

Counties of Chautauqua and Cattaraugus

Superintendent Employment Application

Submit the following to the search consultant: letter of intent clearly stating your interest in the superintendency and specific qualifications for the position (NYS SDA, SDL, or equivalent out-of-state certification), completed application form, concise resume, college/university credential folder, official transcripts, and three letters of reference. Please request that your college/university placement office forward your credentials and official transcripts as soon as possible. You are invited to write about achievements that you look upon with pride. Attach selected supportive materials with your letter of intent. Please fill out the entire application in detail as the form will be separated from other papers during the process.

Personal Information:

_____ Last Name	_____ First	_____ Middle Initial
_____ Home Address		_____ Home Phone w/Area Code
_____ Preferred Email Address		_____ Cell Phone w/Area Code

Return to Search Consultant:

David O'Rourke, Ph.D.
District Superintendent & Chief Executive Officer
Erie 2-Chautauqua-Cattaraugus BOCES
8685 Erie Road
Angola, NY 14006

Inquiries:

Phone: (716) 549-4454, ext. 4029
Email: dorourke@e2ccb.org

Applicants should not contact members of the
Frewsburg Board of Education or school district personnel. All
inquiries must be directed to Dr. O'Rourke.

Application Filing Deadline:
Thursday, April 2, 2026



Frewsburg Central School District provides equal employment opportunities to all individuals and does not discriminate on the basis of age, race, creed, religion, color, national origin, citizenship or immigration status, sexual orientation, gender identity or expression, military status, sex, or predisposing genetic characteristics, familial status, marital status, or status as a victim of domestic violence.

Education & Professional Preparation:

High School & Location

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College Institution & Location	Degree Earned	Major/Minor	Sem. Hrs.	Date

Certification / Title	State	Date Issued	Expiration Date

Have you completed the Superintendent Development Program (SDP)? ☐ Yes ☐ No ☐ No, but currently enrolled

Tenure Status

Were you ever appointed to tenure in a public school district in New York State? ☐ Yes ☐ No If yes, complete:

Tenure area: _____

Date tenure granted: _____

Name and address of school district where tenure was granted: _____

If you were appointed to tenure in other district(s) and/or tenure area(s), please attach that information to the application.

It is the applicant's responsibility to have official college transcripts, credential file, and copy of certification(s) forwarded to the search consultant.

Current Employment:

Employer: _____ Business Phone w/Area Code: _____

Address: _____

Job Title: _____ Date Employment Began: _____

Immediate Supervisor, Title, and Phone: _____

May we contact for reference? ☐ Yes ☐ No ☐ Later

School District Enrollment: _____ Annual Budget: _____ Total # of Employees: _____

Summarize the nature of the work performed and job responsibilities: _____

Previous Employment:

Employer: _____ Business Phone w/Area Code: _____

Address: _____

Job Title: _____ Dates of Employment: _____

Immediate Supervisor, Title, and Phone: _____

May we contact for reference? ☐ Yes ☐ No ☐ Later Reason for Leaving: _____

School District Enrollment: _____ Annual Budget: _____ Total # of Employees: _____

Summarize the nature of the work performed and job responsibilities: _____

Employer: _____ Business Phone w/Area Code: _____

Address: _____

Job Title: _____ Dates of Employment: _____

Immediate Supervisor, Title, and Phone: _____

May we contact for reference? ☐ Yes ☐ No ☐ Later Reason for Leaving: _____

School District Enrollment: _____ Annual Budget: _____ Total # of Employees: _____

Summarize the nature of the work performed and job responsibilities: _____

Employer: _____ Business Phone w/Area Code: _____

Address: _____

Job Title: _____ Dates of Employment: _____

Immediate Supervisor, Title, and Phone: _____

May we contact for reference? ☐ Yes ☐ No ☐ Later Reason for Leaving: _____

School District Enrollment: _____ Annual Budget: _____ Total # of Employees: _____

Summarize the nature of the work performed and job responsibilities: _____

Should you require more space, please attach additional pages to the application.

Military Experience:

Branch of Service: _____ Rank/Specialty: _____

Dates of Service: _____

Did you have anything other than an honorable discharge? ☐ Yes ☐ No

If you answered yes, you will not necessarily be disqualified as an applicant for employment. Please explain below:

Additional Information:

Have you ever been convicted of a crime (misdemeanor and/or felony)? ☐ Yes ☐ No

Are any criminal charges or proceedings pending against you? ☐ Yes ☐ No

Have you ever been dismissed from a position? ☐ Yes ☐ No

Have you ever resigned from a position to avoid a denial of tenure? ☐ Yes ☐ No

Have you ever resigned as an alternative to facing any type of charges or dismissal? ☐ Yes ☐ No

Have you ever been found guilty of charges pursuant to New York State Education Law 3020-a? ☐ Yes ☐ No

Have you ever been the subject of a Part 83 notification to the NYS Education Department? ☐ Yes ☐ No

Have you ever had a teaching/administrative certificate revoked or suspended? ☐ Yes ☐ No

If you answered yes to any of the above, you will not necessarily be disqualified as an applicant. Please explain below:

Are you able to perform the essential functions of this position with or without reasonable accommodations? ☐ Yes ☐ No

Are you legally eligible for employment in this country? ☐ Yes ☐ No

If employed, you will be asked to produce two original forms of identification.

References:

Please provide five (5) individuals who may be contacted to provide a reference on your professional performance, professional demeanor, and/or professional achievements. These must include an administrator who has worked or currently works for you, a board member, a president of a local bargaining unit, and a prominent community member. Please do not state "see resume or placement folder."

Administrator: _____ Dates Known: _____

Title: _____

Address: _____

Work Phone w/Area Code: _____ Home Phone w/Area Code: _____

Board Member: _____ Dates Known: _____

Title: _____

Address: _____

Work Phone w/Area Code: _____ Home Phone w/Area Code: _____

Bargaining Unit President: _____ Dates Known: _____

Title: _____

Address: _____

Work Phone w/Area Code: _____ Home Phone w/Area Code: _____

Prominent Community Member: _____ Dates Known: _____

Title: _____

Address: _____

Work Phone w/Area Code: _____ Home Phone w/Area Code: _____

Other Reference: _____ Dates Known: _____

Title: _____

Address: _____

Work Phone w/Area Code: _____ Home Phone w/Area Code: _____

Waiver and Release for Applicant Background Check:

By signing below, I hereby authorize Erie 2-Chautauqua-Cattaraugus BOCES and the Frewsburg Board of Education to verify and investigate all statements I have made on the employment application, related papers, and in interviews, and I further waive the right of access to any information submitted by these references. I authorize the BOCES to contact all employers and personal references listed on my employment application. In addition, I authorize all individuals, schools and employers mentioned on my employment application to freely provide any information requested that may be relevant and helpful in making a hiring decision. I release any such individuals, schools and employers from any and all legal liability or damage for disclosing any information about me.

I do hereby affirm that all statements and materials submitted by me are true and complete. I understand that any false or inaccurate statements will be considered justification for disqualification of my application or termination of my employment, if discovered at any time after employment has commenced. In addition, I understand that if this form is not signed and submitted with the appropriate completed application form, I will not be considered for employment by the Frewsburg Central School District.

Applicant's Statement:

I certify that all statements herein are true, accurate and complete, and I understand that any false, misleading, or willful omissions shall be just cause for dismissal or refusal of employment.

I understand that Erie 2-Chautauqua-Cattaraugus BOCES, acting on behalf of the Frewsburg Central School District (hereafter known as "the District") will thoroughly investigate my work and personal history and verify all data given on this application, related papers, and in interviews.

I authorize all individuals, schools and employers mentioned therein to provide any information requested about me, and I release them from any and all legal liability or damage for disclosing information about me.

I understand that I am not guaranteed employment by merely completing this application and even if I am hired by the District, this document is not to be considered a contract for employment. If I am chosen for employment by the District, I agree to conform to its rules and regulations as set forth in the Employee Handbook and/or policies, and I acknowledge that these rules and regulations may be changed, interpreted, withdrawn, or added to by the District at any time at the District's sole discretion without prior notice to me.

Pursuant to the School Finger Printing Law (2000 New York Laws, Chapter 180), I understand that I will not be eligible for employment by the District if the New York State Education Department does not clear me for employment after my fingerprints are reviewed by the Division of Criminal Justice Services.

If requested by the District in connection with this application and if given a bona fide offer of employment, I agree to take a medical examination in accordance with District policies. I agree that the examining authority may disclose the findings of these examinations to the District and that my initial employment is conditioned upon meeting the requirements of that examination as established by the District.

This employment application will be valid for one (1) year from the date it is received.

Signature

Date