



City School District of Albany
Workforce Diversity Employment Opportunities
(For CSDA use only)

Personal Information:

Name: _____
Address: _____
Telephone: _____
Email: _____
Race: _____
Sex: _____

High school graduate: **Y/N** High school name: _____
TASC (formally GED): **Y/N** Would you like information about TASC programs **Y/N**
College or Technical: **Y/N** School Name: _____
Graduated?: **Y/N** Area of study: _____

Military History:

Veteran **Y/N** Branch: _____ Years of service: _____

Skills and Certifications:

OSHA 10	Y/N	Doors/Hardware	Y/N
OSHA 30	Y/N	Heavy/Hightway	Y/N
Confined Space	Y/N	Drywall	Y/N
Concrete	Y/N	Trim/Millwork	Y/N
Scaffold	Y/N	Metal Framing	Y/N
Framing	Y/N	Welding	Y/N

Other? _____

Work History:

Starting with most recent job, please provide the following info:

Company name: _____
Company phone: _____
Currently employed?: _____
Start and end dates: _____
Work performed: _____
Reason for leaving: _____

(over)

Work History (continued):

Company name: _____

Company phone _____

Start and end dates: _____

Work performed: _____

Reason for leaving: _____

Please attach additional pages as required for additional work history.

If you cannot complete the form today, use one of these options:

--Email this form to the City School District of Albany: mwbe@albany.k12.us

--Fax the form to (518) 475-6024

--Mail or hand deliver this form to:

City School District of Albany, 1 Academy Park, Albany, NY 12207