



Application for the Position of

# DISTRICT SUPERINTENDENT & CEO

#### **DIRECTIONS:**

- Please submit the following materials to the search consultant:
   Cover letter, current resumé, proof of administrative certification (SDA/SDL), completed application, and three references.
- Applicants are prohibited from contacting members of the CiTi BOCES Board.
- Please answer all sections completely and enclose additional pages as needed throughout the application.



Lact Name

#### PERSONAL INFORMATION

rast name	
First Name	Middle Initial
Home Address	
City/State/Zip	
Phone Number	
Email Address	
Current Employer	
Current Title	
Number of People Reporting Directly to You	
District Enrollment	District Budget
Business Address	
City/State/Zip	
Phone Number	



Deadline for all application materials is:

January 10, 2025

All materials should be sent to:

Scott A. Budelmann,

District Superintendent & CEO

Madison-Oneida

**Board of Cooperative Educational Services** 

4937 Spring Road

PO Box 168

Verona, NY 13478

**Email:** 

nmaiura@moboces.org

Telephone:

315.361.5510

**Online application available at:** CITIBOCES.org

## **PROFESSIONAL EDUCATION**

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UNDERGRADUATE							
Institution	Degree	Date					
GRADUATE							
Institution	Degree	Date					

## **EMPLOYMENT HISTORY**

Please list all career experience in reverse chronological order beginning with your current position. Please include both school and non-school experience, as well as
military experience, if applicable.

Employer & Address		
Position Held	Phone Number	
Dates (to/from)	Supervisor name and title	
Reason For Leaving		
Employer & Address		
	Phone Number	
Dates (to/from)	Supervisor name and title	
Reason For Leaving		
Employer & Address		
	Phone Number	
Dates (to/from)	Supervisor name and title	
Reason For Leaving		
Employer & Address		
	Phone Number	
Dates (to/from)	Supervisor name and title	
Reason For Leaving		
MILITARY EXPERIENCE		
Branch of Service	Rank/Specialty	

Dates of Service: From\_\_\_\_\_\_ To \_\_\_\_\_\_ Discharge Type: \_\_\_\_\_\_

## **PROFESSIONAL CERTIFICATION & LICENSURE**

#### **CERTIFICATES OR LICENSES**

Type of Certificate(s)	Date Issued	Expiration Date	Valid in State of

#### **WRITING SAMPLE**

Please answer the following question in approximately 500 words.

Please explain why you want to be the District Superintendent & CEO for the CiTi BOCES. What do you hope to accomplish in the BOCES?

B	BACKGROUND INFO	ORMA	LION							
1.	1. Have you ever been fingerprinted for	the purpose o	of employ	/ment?	Yes	No				
2.	2. Have you been cleared by NYSED for t	eaching?	Yes	No						
3.	3. Are you legally eligible for employme	nt in this cou	ntry?	Yes	No					
4.	4. Can you physically perform the essent	tial functions	of the po	sition for w	hich you a	re applyin	ng either with or witho	ut a reasonabl	e accommod	ation ?
	Yes No									
lf th	lf the answer to any of the following questi	ions is "yes", p	lease atta	ach an expla	nation for	each "yes"	response to this applic	ration.		
5.	Do you have any criminal convictions as an applicant for employment)  Yes  No	that have no	t been se	aled? (If you	ı answer y	es to this c	question, you will not	necessarily be	disqualified	
6.	6. Have you ever been found guilty of chadisqualified as an applicant for employ	•	t to New` Yes	York State Ed No	ducation La	ıw 3020-a	? (If you answer yes to	this question, y	ou will not ne	ecessarily be
7.	7. Have you ever been dismissed from a an applicant for employment) Y	position, or r	-	o avoid disr	nissal? (If	you answe	er yes to this question,	you will not no	ecessarily be	disqualified as
8.	8. Have you ever received an unsatisfact	ory rating in	conjuncti	on with any	/ pedagog	ical or scho	ool administration em	ployment?	Yes	No
9.	9. Have disciplinary charges ever been p	roffered agai	nst you b	y an emplo	yer?	Yes	No			
10.	10. Have you ever been denied tenure?	Yes	No							
By s BOO I au sch a hi add	WAIVER AND RELEA By signing below, I, BOCES (hereafter known as "the District") I authorize Madison-Oneida BOCES to con schools and employers mentioned on my a hiring decision. I release any such indivi addition, I understand that if this form is the District.	to verify and tact all emplo employment duals, school	investiga oyers and applicat s and em	ate all state I personal re ion to freely ployers fron	ments I ha eferences I provide a n any and	, her ve made o isted on m ny informa all legal lia	reby authorize Madiso on the employment ap ny employment applica ation requested that n ability or damage for c	n-Oneida BOCE plication, relat ation. In additi nay be relevant lisclosing any i	ES acting on bed papers and on, I authorized and helpful of formation a	d in interviews. Te all individuals, in making bout me. In
Sigı	Signature						Date .			
A	•	at all stateme	ents here			•	ete, and I understand t issal or refusal of empl	•		
Sigi	Signature						Date			