



**THE NEW YORK CITY DEPARTMENT OF EDUCATION**

**JOEL I. KLEIN, Chancellor**

DIVISION OF HUMAN RESOURCES  
65 Court Street – Brooklyn, NY 11201

**OFFICE OF REGIONAL FIELD SERVICES**  
**65 COURT STREET - ROOM 811**  
**BROOKLYN, NEW YORK 11201**  
**(718) 935-2900**

**APPLICATION FOR WITHDRAWAL OF RESIGNATION/RETIREMENT**

- Complete all items listed below. PLEASE PRINT CLEARLY.

**SECTION I - PERSONAL INFORMATION**

Date: \_\_\_\_\_  
Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_  
Soc Sec #: \_\_\_\_\_ File #: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Telephone: \_\_\_\_\_ EMAIL ADDRESS: \_\_\_\_\_

**SECTION II - TEACHING SERVICE IN NEW YORK CITY SCHOOLS PRIOR TO RESIGNATION/RETIREMENT**

License Area and Level: \_\_\_\_\_  
Date of Resignation/Retirement: \_\_\_\_\_  
Last District/Boro/School: \_\_\_\_\_

**EMPLOYMENT SINCE RESIGNING/RETIRING FROM THE NEW YORK CITY PUBLIC SCHOOLS:**

Name of School District And/Or Company: \_\_\_\_\_  
Name of Principal And/Or Supervisor: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Phone Number: \_\_\_\_\_ Fax Number: \_\_\_\_\_  
Employment Dates: From \_\_\_\_\_ To \_\_\_\_\_  
Job Title: \_\_\_\_\_  
Reason for separation from service: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**PLEASE READ CAREFULLY**

An employee who has resigned may be permitted to withdraw a resignation as outlined below, provided the following conditions exist:

- At the time of resignation, the individual had completed at least one year (or two full school terms) of satisfactory, regularly appointed service under the license;
- The license has not been invalidated, and is not subject to such action for failure to satisfy certification requirements.
- Employees who were tenured prior to the resignation will not have to serve a probationary period, provided withdrawal of resignation occurs within five years of the resignation.
- Employees who were tenured prior to a resignation and withdraw the resignation after five years have transpired, must serve a two year probationary period.
- Employees who were not tenured prior to resignation must serve a three year probationary period following withdrawal of resignation.
- Employees will be permitted to withdraw a resignation subject to medical approval, fingerprint clearance, and verification of employment (since resigning/retiring from the New York City Public Schools).
- APPROVAL OF WITHDRAWAL OF RESIGNATION SHALL BE CONTINGENT UPON RECEIPT OF A WRITTEN REQUEST TO FILL A VACANCY APPROVED BY THE REGIONAL MANAGER OR REGIONAL PERSONNEL LIAISON.

IMPORTANT NOTICE: Employees who are absent for 20 consecutive school days or more without notice are deemed to have resigned in accordance with applicable collective bargaining agreements. Also considered to have resigned are employees who have failed to return following leaves of absence. It has been upheld by arbitration that employees deemed to have resigned in accordance with such agreements are not eligible for withdrawal of resignation.

STATE OF NEW YORK COUNTY OF \_\_\_\_\_

Soc. Sec. #: \_\_\_\_\_

PRINT NAME: \_\_\_\_\_, being duly sworn, deposes and says, I the undersigned, transmitted to the Chancellor my resignation as a teacher in the schools of the City of New York on or about \_\_\_\_\_ 20\_\_\_\_\_: now therefore, in consideration of being allowed to withdraw my aforesaid resignation, under the Chancellor's Regulations (former Bylaw Section 255 adopted on April 9, 1953); and of being restored to a teaching position; and for other good and valuable considerations; and in view of the fact that I have since my said resignation rendered no service to the Department of Education except as a substitute teacher, for which service I have been compensated in full, I do hereby release the Board of Education from any and all claims that I, or my heirs, executors, administrators, or assigns, may have for salary or salary increment, or service credit, for any purpose whatsoever from \_\_\_\_\_, the date upon which my said resignation became effective, to the date upon which I shall be regularly restored to a position on the teaching staff; and I do hereby agree to serve a probationary period of appointment in accordance with the Regulations of the Chancellor.

I make this affidavit knowing and intending that the Department of Education and the Chancellor will rely thereon in granting me permission to withdraw my resignation.

Applicant Signature: \_\_\_\_\_

Sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_\_

Answer "YES" or "NO" to the following questions. If your answer to any of these questions is "YES", explain, giving details, in the space provided below. You must answer these questions truthfully even though you may have disclosed the same information to the Department of Education or another agency on a previous occasion. Please be advised that if you answer "NO" to question #1 and your fingerprint results disclose a conviction record, your application will be denied. Please sign your name at the end of this section.

		YES	NO
1.	Have you ever been convicted of or pled "GUILTY" or pled "NO CONTEST" to any offense in this state or elsewhere? [This includes Felonies, Misdemeanors and Violations. For Felonies or Misdemeanors, you must answer "Yes" if you were convicted or pled guilty or no contest even if your records have been sealed.]		
2.	Are any criminal charges currently pending against you anywhere?		
3.	Have you ever been placed on a state registry as a sex offender in New York State or elsewhere?		
4.	Have you ever forfeited bail or bond following your appearance as a defendant in a criminal court action?		
5.	Has a warrant been issued by a court requiring that you appear in court?		
6a.	Has a Family Court ever found that you abused or neglected a child? If so, explain below which court issued the finding, the nature of the finding, and when it happened.		
6b.	Are you currently in arrears [4 months or more] for child support payments?		
7.	Have you ever been discharged [fired] or required to resign from any position for reasons other than a layoff due to reduction in the work force?		
8.	Have you ever been denied employment as a result of information obtained following a background check or investigation? If so, explain the reasons for denial of employment below.		
9.	Have you ever resigned or left a job rather than face charges or dismissal?		
10a.	Has an employer ever brought or filed charges against you?		
10b.	If yes, were you found guilty of the charges?		
11.	Have you ever had any professional certificate or license denied, revoked or suspended?		
12.	Have you ever applied for a civil service position, such as police officer or worker for a federal, state, city or local agency, and been notified you do not qualify?		
13.	Have you ever had a teaching license or certificate denied, revoked or suspended by any Education Department: New York City, New York State or elsewhere?		
14.	Have you ever received an unsatisfactory rating or unsatisfactory evaluation for your work in a school?		
15.	Have you ever lost your job as a teacher, or as another pedagogue, before achieving tenure?		
16.	Did you ever receive a discharge from military service for reasons other than an honorable discharge?		
17a.	Are you now, or were you ever employed by the NYC Department of Education? If yes, indicate dates _____.		
17b.	Were you ever fingerprinted by the NYC Department of Education?		

Explanation: \_\_\_\_\_

**Falsifying an employment application is a punishable offense under the Penal Law of New York State.**

\_\_\_\_\_  
Signature of person being fingerprinted

\_\_\_\_\_  
Today's Date

**SECTION III: EMPLOYMENT ELIGIBILITY VERIFICATION**

COMPLETE

EXEMPT

\_\_\_\_\_  
Signature of Examiner

\_\_\_\_\_  
Signature of Fingerprint Technician

