

DEPARTMENT OF EDUCATION
CITY SCHOOL DISTRICT OF NEW YORK
DIVISION OF HUMAN RESOURCES
65 Court Street - Brooklyn, New York 11201

Date: March 30, 2009

Vacancy Summer 2009 Please Post.

(SUBJECT TO FUNDING AVAILABILITY)

POSITION: Supervising School Aide / School Aide (600 anticipated positions)
LOCATION: Elementary, Intermediate / Junior High School and High Schools
ELIGIBILITY: Applicants must be presently employed as Supervising School Aides / School Aides by the New York City Department of Education

SELECTION CRITERIA: As per Collective Bargaining Agreement

DUTIES AND RESPONSIBILITIES: In the cafeteria, at the direction of the teacher in charge, assures compliance with all local and federal regulations regarding the summer Breakfast and Lunch program, maintains appropriate records and performs other related tasks.

SALARY: As per Collective Bargaining Agreement

WORK SCHEDULE: Four hours, thirty minutes per work day
Monday through Friday (TENTATIVE)
8:30 a.m. – 1:30 p.m. (TENTATIVE)
Half-hour unpaid break must be taken between 10:15 a.m. and 10:45 a.m.

(TIME MAY BE MODIFIED DEPENDING ON A SCHOOL'S SUMMER SCHEDULE)

Session 1: June 29, 2009 through July 29, 2009

Session 2: July 30, 2009 through August 28, 2009

MAY BE SUBJECT TO CHANGE

APPLICATION: Complete attached application and send it with resume by: May 6, 2009 to Lance Hermus, Office of School Support Services, 44-36 Vernon Boulevard, Long Island City, New York 11101.

NOTE: ONLY SUPERVISING SCHOOL AIDES AND SCHOOL AIDES CAN APPLY FOR THIS POSITION. APPLICANTS MUST APPLY FOR SESSION 1 OR SESSION 2

ARTICLE XVIII of the contract between Local 372, DC 37 (AFSCME) and the Department of Education reads in part,

“School Aide positions in the Department of Education summer meal program will be posted”

AN EQUAL OPPORTUNITY EMPLOYER M/F/D

APPROVED: Renée Harper

Division of Human Resources

**DEPARTMENT OF EDUCATION
SCHOOL FOOD
SUPERVISING SCHOOL AIDE AND SCHOOL AIDE APPLICATION
BREAKFAST AND LUNCH PROGRAM**

Please print clearly

Social security # : _____

Mr. / Mrs. / Ms. _____
First Name Last Name Middle Initial

Home address: _____
Number / Street City / State Zip Code

Home telephone # : (____) _____ - _____

Cell telephone # : (____) _____ - _____

2008/2009
Day School Assignment _____
Region School Borough

Please select only one session to work: _____
Session 1

OR

Session 2

If one session is not chosen, placement will be determined by availability.

Please provide starting year appointed as School Aide _____
Date

I HEREBY CERTIFY THAT TO THE BEST OF MY KNOWLEDGE AND BELIEF THE STATEMENTS IN THE FOREGOING APPLICATION ARE TRUE, COMPLETE AND ACCURATE AND ANY MISREPRESENTATION OF MATERIAL FACTS ON THIS APPLICATION THROUGH MISSTATEMENTS OR OMISSIONS MAY CAUSE INVALIDATION OF THIS APPLICATION.

Signature