



THE UNIVERSITY OF THE STATE OF NEW YORK/THE STATE EDUCATION DEPARTMENT
ALBANY, NY 12234

New York State Testing Program Grades 3-8 English Language Arts and Mathematics Recruitment Form

Please complete ALL information on this form in a Word document for E-mail.

Date: _____

Name: _____
(Mr./Mrs./Ms.) (First) (Last)

Home Address: _____

City: _____ State: _____ Zip: _____

Home/Cell Telephone: (____) _____ - _____

Gender: Male _____ Female _____

School District: _____

School Name: _____

Street: _____

City/Town: _____ State: New York Zip: _____

School Telephone: (____) _____ - _____

Name of Principal: _____

Email Address (most frequently used): _____ @ _____

Work Status: Full Time _____ Part Time _____

Retired _____

Year you retired? _____

Check the region in which your school is located.

- Long Island
- New York City
- Lower Hudson
- Mid-Hudson
- Capital District
- North Country/Adirondacks
- Central
- Western
- Southern Tier

Which of the following describes your race/ethnicity? *

- Black
- Hispanic
- Native American/Alaskan Native
- White
- Asian and/Pacific Islander
- Other

*Please note: This information is used solely to ensure diversity in teacher representation on the Department committees.

New York State Certification(s):

- K-6 Subject area(s): _____
- 7-8 Subject area(s): _____
- 9-12 Subject area(s): _____
- other Specify area(s): _____

Education: B.A./B.S. _____ M.A./M.S. _____ Other _____

Current Position:

- Classroom Teacher Grade(s) _____
- Classroom Teacher Subject Specialist Grade(s) _____
- Special Education Teacher Grade(s) _____
- Bilingual/ELL Teacher Grade(s) _____
- Curriculum/Specialist _____
- Professional Development Specialist _____
- Director _____
- Supervisor _____
- School Administrator _____
- Reading Teacher Grade(s) _____
- Reading Specialist Grade(s) _____

Please indicate the content area for which you are interested in attending. You must plan on attending ALL the days for the respective processes.

- English Language Arts
- Mathematics

Have you worked with the State Education Department before? What experience have you had with test development tasks? (i.e. item writing, item review, final eyes review, standard setting, and range finding)

What other teaching experience do you have? (i.e. local or regional scorer, scoring leader, facilitator, curriculum writing, local level experience with test development) Please explain.

PROFESSIONAL REFERENCES

1. _____

2. _____

3. _____

Please return this form along with your *resume`* to the Office of State Assessment **for English Language Arts or Mathematics**. You will be notified **by e-mail** if you have been selected to participate. Please e-mail your form to: emscassessinfo@mail.nysed.gov. **If fax is more convenient for you, you may send to 518-402-5596.**