

**Putnam/Northern Westchester  
BOARD OF COOPERATIVE EDUCATIONAL SERVICES  
200 BOCES Drive, Yorktown Heights, NY 10598-4399**

NAME OF TEACHER \_\_\_\_\_  
(please print or type)

Have you ever been appointed to tenure in BOCES or any other school district in New York State?

Yes  No

If yes, what district? \_\_\_\_\_

What tenure area? \_\_\_\_\_

Please submit written proof of your tenure. This may be in the form of a letter from the Board of Education or a copy of the Board Minutes.

DATE \_\_\_\_\_  
\_\_\_\_\_  
(Signature of Teacher)

**Return signed form to Donna Ardovini, Human Resource Dept.**