

The Public Schools of Northborough and Southborough

53 Parkerville Road, Southborough, MA 01772

Phone (508) 486-5115~ Fax (508) 486-5123

APPLICATION FOR EMPLOYMENT

This application must be completed in its entirety, even if you have provided a resume. Please print legibly.

The Public Schools of Northborough and Southborough is an Equal Opportunity/Affirmative Action Employer. It is the policy of the Public Schools of Northborough and Southborough to afford equal employment opportunity to all qualified persons regardless of race, color, religious creed, national or ethnic origin, age, disability or handicap, military or Veteran's status, sex or gender, sexual orientation, genetic information, gender identity, gender expression, pregnancy or pregnancy-related condition, or any other characteristic protected under applicable Federal, State or local law.

PERSONAL INFORMATION

Last Name: _____	First Name: _____	Middle Initial: _____
Street Address: _____		
City/Town: _____	State: _____	Zip Code: _____
Mailing Address (if different): _____		
City/Town: _____	State: _____	Zip Code: _____
Home Phone #: _____	Cell Phone #: _____	
Email Address: _____		
Are you authorized to work in the U.S. on an unrestricted basis? Yes <input type="checkbox"/> No <input type="checkbox"/>		
In compliance with federal law, all persons hired will be required to verify identity and eligibility to work in the United States and to complete the required employment eligibility verification document form upon hire.		

EMPLOYMENT INFORMATION

Position:	Teacher	Nurse	<input type="checkbox"/> ESP/Paraprofessional	<input type="checkbox"/> Other: _____
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LICENSURE (Please attach copy)

Do you have a current Massachusetts Department of Elementary & Secondary Education License? <input type="checkbox"/> Yes <input type="checkbox"/> No
DESE License # _____ Date DESE License was issued: ____/____/____
If you do not have a current Massachusetts license, what is your licensure status? <input type="checkbox"/> Pending <input type="checkbox"/> Ready for Review <input type="checkbox"/> Expired <input type="checkbox"/> Other, please specify _____
What other professional licenses do you hold? _____

EDUCATION INFORMATION

	SCHOOL NAME CITY/STATE	DATES ATTENDED	DEGREE*	DIPLOMA/DEG REE	MAJOR/MINOR
HIGH SCHOOL					
COLLEGE*					
GRADUATE*					
OTHER					

**Original college/university transcripts must be provided prior to hire.*

EMPLOYMENT INFORMATION

Present employer:

Are you under contract?	Date contract expires: ____/____/____
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TEACHING EXPERIENCE *(If Applicable)*

Name of School, Town & State	P or PR ¹	Date From	Date to	#of yrs Full Time	# of yrs Part Time ²	Grades or Subjects Taught	Type of Experience ³

¹Public (P) or Private (PR) School. ²If part-time, indicate actual hours or percentage. ³Please indicate whether student teaching, regular contact, or substitute teaching.

OTHER PROFESSIONAL EXPERIENCE *(If Applicable)*

ADDITIONAL RELEVANT ACTIVITIES, HONORS OR VOLUNTEER WORK *(If Applicable)*

REFERENCES - List below three references, not related to you, who would have first-hand knowledge of your character, personality, and teaching ability. If you are an experienced teacher, list the names of superintendents, principals, or supervisors under whom you have recently taught (i.e. your last three positions).

Name	Occupation	Relationship	Years Known	Phone Number

REFERRAL INFORMATION - How were you referred to us? *(Please check all that apply)*

<input type="checkbox"/> Public Schools of Northborough & Southborough website	<input type="checkbox"/> SchoolSpring.com
<input type="checkbox"/> Workforce Central	<input type="checkbox"/> Other: _____
<input type="checkbox"/> Current/former employee (please specify) _____	

I hereby affirm that the statements made in this application and the information that I have provided on this application and accompanying documents are true and correctly recorded to the best of my knowledge and belief and are made under the penalties of perjury.

I acknowledge that my appointment is contingent upon the return of an acceptable CORI (Criminal Offender Record Information) and a suitable fingerprinting determination based on the report received from the National Criminal Background Check.

_____/_____/_____
 Signature of Applicant Date

 Printed Name

It is unlawful in Massachusetts to require or administer a lie detector test as a condition of employment or continued employment. An employer who violates this law shall be subject to criminal penalties and civil liability.