



90 Industrial Park Road
Hingham, MA 02043

Application for Employment

We consider applicants for all positions without regard to race, color, religion, creed, gender, national origin, age, disability, marital or veteran status, sexual orientation, or any other legally protected status.

WE ARE AN EQUAL OPPORTUNITY EMPLOYER

Position for which you are applying	Date of Application

Last Name	First Name	Middle Name
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Address	Number	Street	City/Town	State	Zip Code
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Telephone Number	Social Security Number
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"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."

If you are under 18 years of age can you provide required proof of your eligibility to work? Yes No

Have you ever filed an application with us before? Yes No

Are you currently employed? Yes No

May we contact your present employer? Yes No

Are you prevented from lawfully becoming employed in this country because of a Visa or immigration status? Yes No

Proof of citizenship or immigration status will be required upon employment

On what date would you be available for work? _____
 Are you available to work: full time part time

Have you ever been convicted of a criminal offense? Yes No

Under Massachusetts law, you may answer "no" if any of the following circumstances are applicable:

1. An arrest which did not result in a conviction;
2. A first conviction for any of the following misdemeanors: drunkenness, simple assault, speeding, minor traffic violations, affray or disturbance of the peace;
3. Any conviction of a misdemeanor where the date of such conviction or the completion of any period of incarceration therefrom (whichever is later) occurred five or more years prior the date of this questionnaire, unless you have been convicted of any offense within five years immediately preceding the date of this questionnaire?
4. Your conviction record has been sealed pursuant to Massachusetts law;
5. You have juvenile delinquency or child in need of services complaint, which were not transferred to Superior Court for prosecution.

Date _____ Place or Court _____ Charge _____

Details: _____

EDUCATIONAL PREPARATION THROUGH BACHELOR' S DEGREE

School	Name	Location	Specialization or Nature of Course Completed	Degree/Diploma	Graduated Date
High School					
College					

Scholastic Honors _____

EDUCATION RECEIVED AFTER BACHELOR' S DEGREE

Institution	Dates Attended	Specialization or Nature of Course Completed	Degree/Diploma	Date	Semester Hours Credit

Employment Experience

Start with your present or last job. Include any job-related military service assignments and certifiable volunteer activities. You may exclude organizations which indicate race, color, religion, gender, national origin, handicap or other protected status.

EMPLOYMENT HISTORY

1. STUDENT TEACHING, INTERNSHIP OR PRACTICUM EXPERIENCE

From		To		School	Location	Grade and/or Subject
Mo.	Yr.	Mo.	Yr.			

2. TEACHING EXPERIENCE - Exclusive of Student Teaching / list chronological order

From		To		Nature of Position	School and Location	Name of Principal or Supervisor	Annual Salary
Mo.	Yr.	Mo.	Yr.				

3. OTHER PROFESSIONAL / WORK EXPERIENCES

1. Employer	Dates Employed		Work Performed
	From	To	
Address			
Telephone Number(s)	Hourly Rate/Salary		
Job Title	Starting	Final	
Supervisor			
Reason for Leaving			

2. Employer	Dates Employed		Work Performed
	From	To	
	Address		
	Telephone Number(s)		
	Hourly Rate/Salary		
Job Title	Supervisor	Starting	Final
Reason for Leaving			

3. Employer	Dates Employed		Work Performed
	From	To	
	Address		
	Telephone Number(s)		
	Hourly Rate/Salary		
Job Title	Supervisor	Starting	Final
Reason for Leaving			

4. Employer	Dates Employed		Work Performed
	From	To	
	Address		
	Telephone Number(s)		
	Hourly Rate/Salary		
Job Title	Supervisor	Starting	Final
Reason for Leaving			

If you need additional space, please continue on a separate sheet of paper.

List professional, trade, business or civic activities and offices held.
 You may exclude membership which would reveal gender, race, religion, national origin, age, ancestry, disability or other protected status:

Additional Information

Other qualifications

Summarize special job-related skills and qualifications acquired from employment or other experience.

Note to applicants: DO NOT ANSWER THIS QUESTION UNLESS YOU HAVE BEEN INFORMED ABOUT THE REQUIREMENTS OF THE JOB FOR WHICH YOU ARE APPLYING.

Are you capable of performing in a reasonable manner the activities involved in the job or occupation for which you have applied? A description of the activities involved on such a job or occupation is attached.

Yes

No

References

1. _____ ()
 Name Phone #

 Address

2. _____ ()
 Name Phone #

 Address

3. _____ ()
 Name Phone #

 Address

Applicant's Statement

I certify that answers given herein are true and complete to the best of my knowledge. I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision. This application for employment shall be considered active for a period of time not to exceed 45 days. Any applicant wishing to be considered for employment beyond this time period should inquire as to whether or not applications are being accepted at that time. I hereby understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with this organization is of an "at will" nature, which means that the Employee may resign at any time and the Employer may discharge the Employee at any time with or without cause. It is further understood that this "at will" employment relationship may not be changed by any written document or by conduct unless such change is specifically acknowledged in writing by an authorized executive of this organization. In the event of my employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand, also that I am required to abide by all rules and regulations of the employer.

 Signature of Applicant

 Date

FOR COLLABORATIVE PERSONNEL USE ONLY

Arrange Interview Yes No

Remarks _____

Employed Yes No Date of Employment _____

Job Title _____ Hourly Rate/ Salary _____ Department _____

By _____ Interviewer _____ Date _____
Name and Title

Notes _____
