

Douglas Public Schools
21 Davis Street
Douglas, MA 01516

Application For Employment

NON-PROFESSIONAL

Name: _____
Last First Middle

Address: _____
No. Street City State Zip

Home Phone: _____ Work Phone: _____ Cell Phone: _____

Email: _____

Please answer all questions below – Please print clearly

Date of Application: ____/____/____

Position(s) applied for: _____

Referral Source: Website____ Friend____ Relative____ Employment Agency ____ Advertisement____

Other ____ Please specify: _____

Have you completed an application or been previously employed by the District? ☐ Yes ☐ No

If yes, which date(s): _____

Are you a citizen of the United States? ☐ Yes ☐ No

If no, are you lawfully authorized to work in the United States? ☐ Yes ☐ No

Are you available to work: ☐ Full Time ☐ Part Time

Have you been laid off and subject to recall? ☐ Yes ☐ No

Are you currently retired? ☐ Yes ☐ No If yes, please state retirement system_____

Excellence in Education

The Douglas Public Schools is committed to maintaining a work and learning environment free from discrimination on the basis of race, color, religion, national origin, pregnancy, gender identity, sexual orientation, marital/civil union status, ancestry, place of birth, age, citizenship status, veteran status, political affiliation, genetic information or disability, as defined and required by state and federal laws. Additionally, we prohibit retaliation against individuals who oppose such discrimination and harassment or who participate in an equal opportunity investigation.

EDUCATIONAL BACKGROUND

HIGH SCHOOL

1.					
School Name	City	State		Year of Graduation	

COLLEGE

1.	School Name	Location	Major	Level of Completion	Year(s) of attendance
2.	School Name	Location	Major	Level of Completion	Year(s) of attendance

EMPLOYMENT HISTORY

List each job held. Start with your present or last job. Please include military service assignments. You may include verified work performed on a volunteer basis.

Employer: _____
Address: _____
Job Title: _____
Supervisor: _____
Reason for Separation: _____
Dates of Employment (MM/DD/YY): _____
Duties: _____

Employer: _____

Address: _____

Job Title: _____

Supervisor: _____

Reason for Separation: _____

Dates of Employment (MM/DD/YY): _____

Duties: _____

Employer: _____
Address: _____
Job Title: _____
Supervisor: _____
Reason for Separation: _____
Dates of Employment (MM/DD/YY): _____
Duties: _____

The Douglas Public Schools is committed to maintaining a work and learning environment free from discrimination on the basis of race, color, religion, national origin, pregnancy, gender identity, sexual orientation, marital/civil union status, ancestry, place of birth, age, citizenship status, veteran status, political affiliation, genetic information or disability, as defined and required by state and federal laws. Additionally, we prohibit retaliation against individuals who oppose such discrimination and harassment or who participate in an equal opportunity investigation.

REFERENCES

List three work related references, not related to you:

1.	_____	_____	_____	_____
	Reference Name	Title/Company	Address	Phone
2.	_____	_____	_____	_____
	Reference Name	Title/Company	Address	Phone
3.	_____	_____	_____	_____
	Reference Name	Title/Company	Address	Phone

I certify that answers given herein are true and complete to the best of my knowledge. I authorize the Douglas Public Schools to make such investigation and inquiries of my personal and employment history and other related matters as may be necessary in arriving at an employment decision. I hereby release employers, schools, or persons from all liability in responding to inquiries in connection with my application. Appointments are conditional based on a satisfactory CORI and SAFIS Background check per 603 CMR 51.00.

In the event of 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 Douglas Public School District.

_____	_____
Applicant's Signature	Date

PLEASE RETURN TO:

Douglas Public Schools
Office of the Superintendent
21 Davis Street
Douglas, MA 01516