### FAIRHAVEN PUBLIC SCHOOLS 128 Washington Street Fairhaven, MA 02719 508-979-4000

# SUBSTITUTE APPLICATION FOR EMPLOYMENT

- 1. THIS APPLICATION IS NOT TO BE USED FOR "TEACHING POSITIONS". PLEASE REFER TO OUR "APPLICATION PROCESS" FOR ALL TEACHING POSITIONS.
- 2. WHEN COMPLETING THIS APPLICATION AND ACCOMPANYING FORMS. PRINT CLEARLY IN INK OR TYPE.
- 3. ANSWER ALL APPLICABLE QUESTIONS CLEARLY AND COMPLETELY.
- 4. MAKE SURE ALL NAMES ARE COMPLETE AND ADDRESSES AND TELEPHONE NUMBERS ARE CURRENT.
- 5. FAILURE TO ANSWER ANY QUESTION COMPLETELY AND TRUTHFULLY MAY RESULT IN YOUR BEING DISQUALIFIED FROM CONSIDERATION FOR EMPLOYMENT OR TERMINATION FROM EMPLOYMENT.
- 6. IT IS UNLAWFUL 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 LIABILITIES.

## To The Applicant: PLEASE READ THIS INTRODUCTION CAREFULLY BEFORE ANSWERING ANY QUESTIONS.

The Civil Rights Act of 1964 prohibits discrimination in employment because of race, color, religion, sex, national origin or disability. Federal Law also prohibits discrimination on the basis of age with respect to certain individuals. The laws of Massachusetts also prohibit some or all of the above-stated discrimination as well as some additional types, such as discrimination based on ancestry, sexual orientation, and marital status.

Questions with an asterisk (\*) immediately to the left of the questions are optional. Although the information is useful on our examination of applicants, your decision not to answer any or all of the asterisk questions will not be held against you.

POSITION OF 1	INTEREST:				
GRADE LEVEI	·	DAYS AVAILABLE	DAYS AVAILABLE		
CERTIFIED TE	CACHERYES	NO If yes, lice	nse #		
A.	I. PEI	RSONAL HISTORY			
Name:					
	(First)	(Middle)	(Last)		
Address:_					
	(Number & Street)				
_	(City /Town)	(State)	(Zip)		
D.O.B		S/S Number:			
B. How long	have you lived at this add	lress?			
Phone:					
	(Home)	(Cell)			

C.	ten year	rs. Include a	ddresses while	le attending s	you have resid chool, if away a d be listed on th	from hom	e, and all military
Fi Month	rom Year	To Month Year	Apt# Numbe	r and Street	City/Town	State	Landlord's Name and Telephone #
					•		
D.	Are you	ı lawfully el	igible for emp	oloyment in the	ne United State	s? Yes	s[] No[]
E.	If you a	re under the	age of 18 ple	ease state you	r age.		
		Y	ears		N/A		
F.	Have yo	ou ever used	another name	e? Yes [	] No[]	If yes, pl	ease explain:
G.	Do you	have a relat	ive in our em	nlovment?	Yes [ ] No	l If ve	es, please give name
G.	•	ationship:		proyment:	103[] 110		
H.	If your	application i	s considered	favorably, on	what date can	you start v	work?
I.	Do you	possess a va	alid driver's li	icense from the	ne Commonwe	alth of Ma	assachusetts?
	Yes [	] No[]	Lic. #_				

J.		ense in this state, or If yes give deta	any other state, ever suils:	ispended or rev	oked?
K.	Have you ever worked agency/dept. and when	_	ity before? If yes, give	e the name of th	ne
L.	. Do you understand tha (Criminal Offender Re	ecord Information)?	Yes [ ] No [	-	).R.I.
		II. ED	UCATION		
A.	List the name and add		g schools you attended	l and dates:	
Schoo	ol Name and Address	Graduation Yes/No	Number of Years Attended	Degree	Major
High	School				
Colle					
Other	<u></u>				
<u>Equiv</u>	alency				
Cours	ses Now Studying				
Gradı	uation date:				
B.	scholastic probation, e	ever taken against y	or was any disciplinary ou during your scholas date and action taken:	tic career?	g
	School:		Date:		
	Action Taken:				

#### III. EMPLOYMENT HISTORY

In reverse chronological order, list all employments (including summer and part time

employments while attending school). All time must be accounted for. If unemployed for

A.

		forth the dates of unemployment. ( <i>Use</i> may also include verifiable work performance)		
Dates: From	То			
Mo/Y1		Name and Address of Employment	Supv. Name	Phone # if known
Please	-	o not want your current employer cont		
	_DO NOT C	ONTACTC	OKAY TO CONTAC	ZT
В.	Have you every	ver been fired or forced to resign becaut? Yes [ ] No [ ] If yes,	se of misconduct of give details:	unsatisfactory

#### V. REFERENCES

1 Name				
1. Name				
City				
Daytime Telephone # (	)	Nighttime	Telephone # (	)
Occupation				
2. Name				
Address	State	Zip	-	
Address	State	Zip	-	)
Address	State	Zip Nighttime	- Telephone # (	)
AddressCityDaytime Telephone # (	State )	ZipNighttime	- Telephone # ( –	)
Address City Daytime Telephone # ( Occupation	State )	ZipNighttime	- Telephone # ( -	)

#### VI. CRIMINAL RECORD

may answer "no record" if any of the following circumstances are applicable.					
	(1)	You have never been arrested for violation of a criminal statute;			
	(2)	You have been arrested but have never been tried for a criminal offense;			
	(3)	You have been tried for a criminal offense but were not convicted;			
	(4)	You have a first conviction for any of the following misdemeanors; speeding, minor traffic violation, drunkenness, simple assault, disturbing the peace;			
	(5)	You have been convicted of misdemeanors where the date of conviction or the termination of incarceration, if any, occurred more than five years before the date of the application;			
	(6)	You have felony or misdemeanor convictions which have been sealed pursuant to Massachusetts Law;			
	(7)	You have juvenile delinquency or child in need of services complaints which were not transferred to Superior Court for prosecution;			
	Have y	ou ever been convicted of a felony? Yes [ ] No [ ]			
	Have y Yes [	vou been convicted of a misdemeanor other than minor traffic violations?  . No [ ]			
	•	have any court judgments pending against you? Yes [ ] No [ ] give details:			
		you ever been convicted of a sexual offense? Yes [ ] No [ ] have answered yes, please state the following:			
	<u>Date</u>	<u>Place/Department</u> <u>Charge/Court/Disposition</u> <u>Docket No</u>			

Note: A conviction record will not necessarily result in a bar to employment.

E.	Have you	u ever been convicted of a	narcotic offense? Yes [ ] No [	]	
F.	•	u ever been sentenced to in No [ ]	mprisonment after conviction of a crir	me?	
G.	trial or d	now under charge for any isposition? Yes [ ] we answered yes please state.	criminal offense on which you are aw No [ ] ate the following:	aiting	
	<u>Date</u>	Place/Department	Charge/Court/Disposition	Docket No.	
H.	H. Have you ever been or are you currently the subject of any petition for restraining requesting or issued pursuant to c. 209A (abuse prevention), of the Massachuse Laws? Yes [ ] No [ ] If you have answered yes, please explain when and where.				
	<u>Date</u>	Place/Department	Charge/Court/Disposition	Docket No.	