

MEDFIELD PUBLIC SCHOOLS



Office of the Superintendent 459 Main Street – 3rd Floor Medfield, Massachusetts 02052 508-359-2302

APPLICATION FOR EMPLOYMENT

POSITION			Date of Application:	Date of Application:	
	Teacher Inclusion Facilitator /Aid Maintenance / Grounds Food Service		Administration Summer Work Substitute Teacher Other:		
If you need help to fill out this application form or during any phase of the application, interview or employment process, please notify the person who gave you this form and every reasonable effort will be made to accommodate your needs in a timely manner.					
PERSONAL INFORMATION Name Address Phone Email Address					
Are you legally qualified to work in the U.S.AYesNo Are you Under 18 Years OldYesNo					
ED	UCATION				
בטי	OCATION				
ED	OCATION	Name/ Location of School	Dates Attended	Degree Completed (Y/N)	
	th School	Name/ Location of School	Dates Attended	Degree Completed (Y/N) (please indicate what type of degree completed)	
Hig		Name/ Location of School	Dates Attended	(please indicate what type of degree	
Hig	th School	Name/ Location of School	Dates Attended	(please indicate what type of degree completed) (please indicate what type of degree	
Hig Voc Col	th School cational, Technical	Name/ Location of School	Dates Attended	(please indicate what type of degree completed) (please indicate what type of degree completed) (please indicate what type of degree	
Voc Col	cational, Technical lege/University aduate / Professional	Name/ Location of School er information you believe is i		(please indicate what type of degree completed) (please indicate what type of degree completed) (please indicate what type of degree completed) (please indicate what type of degree completed)	
Voc Col	cational, Technical lege/University aduate / Professional			(please indicate what type of degree completed) (please indicate what type of degree completed) (please indicate what type of degree completed) (please indicate what type of degree completed)	
Voc Col	cational, Technical lege/University aduate / Professional			(please indicate what type of degree completed) (please indicate what type of degree completed) (please indicate what type of degree completed) (please indicate what type of degree completed)	
Voc Col	cational, Technical lege/University aduate / Professional			(please indicate what type of degree completed) (please indicate what type of degree completed) (please indicate what type of degree completed) (please indicate what type of degree completed)	

Medfield School District does not discriminate on the basis of age, race, color, sexual orientation, gender identity, religion, national origin or handicap in its education activities or employment practices.



MEDFIELD PUBLIC SCHOOLS



EMPLOYMENT HISTORY

Employer's Name				
Address				
Dates Worked				
Job Title				
Reason for Leaving				
May we contact Employer				
Employer's Name				
Address				
Dates Worked				
Job Title				
Reason for Leaving				
May we contact Employer				
Employer's Name				
Address				
Dates Worked				
Job Title				
Reason for Leaving				
May we contact Employer				
REFERENCES				
Provide Name, Address and telephone number of three (3) references (who are not related to you):				
,	. , , , , , , , , , , , , , , , , , , ,			
1.				
2.				
3.				
This application is not intended to and does not create a contract or offer of employment and if hired, employment				
with the Town of Medfield would be on an at-will basis and could be terminated at the will of either party. This At				
Will default rule may be modified by Membership in a Collective Bargaining Unit.				
I attest that the above information is true and accurate.				
Applicants Signature	Date			
Applicants signature	Date			

Medfield School District does not discriminate on the basis of age, race, color, sexual orientation, gender identity, religion, national origin or handicap in its education activities or employment practices.