## SOUTH HADLEY PUBLIC SCHOOLS South Hadley, Massachusetts

## An Equal Opportunity Employer

TUTOR APPLICATION				
Please print	or type D	ate		
	S	ocial Security Nu	mber	
Name Last	Eiret		Middle	
			ione	
I may be con	tacted At work	Work Ph () At ho	one me ()	
E-mail Addre	ess:			
Position app	lied for: (Tutor, Grade Leve	el/School, Times A	vailable)	
Employmen	t History			
Dates Employed From To	Employer	Position	Supervisor	Telephone
Other Relev	ant Work Experience an	nd Achievements		

Academic and Froicssional mainin	Academic and Professi	onal Tra	ining
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College/University & Location	Major/Minor Areas	Degree Granted	Year
Location	-		Tear
Certification and Contractu	ıal Status		
Do you currently hold certifica Massachusetts for the position			of ()
Professional, Civic and Co	mmunity Affiliations		
References			

Please list below the names, addresses, and telephone numbers of four persons who have knowledge of your professional competence and character.

Name	Relationship	Address	Telephone

Do we have permission to contact these persons? Yes (\_\_\_) No (\_\_\_)

## **Applicant's Release**

I hereby verify that the facts set forth on this application are true and complete to the best of my knowledge. I understand that any omission, false or misleading information, or misrepresentation may result in denial of employment or dismissal from employment. I grant permission for the District or its agent to contact previous employers and references to verify any statement made on this application and to release from liability those who furnish such information. I further understand that, should I become a finalist for the position, the selection process requires a signed release to permit the South Hadley Public Schools to conduct a criminal records check for conviction information only, and that it will not necessarily disqualify me for consideration for employment.

<b>Applicant Signature</b>	Da	te
		<del>_</del>

The South Hadley Public Schools are committed to equal employment opportunities to all employees and applicants for employment without regard to race, color, sex, religion, national origin, gender identity, sexual orientation or disability.

Si usted necesita alguna adaptacion o asistencia especial debido a algun tipo de minusvalia, por favor llame al telefono 413-538-5072 (fax para personas con deficiencias auditivas 413-532-6284.