## **SOUTH HADLEY PUBLIC SCHOOLS**

## South Hadley, Massachusetts An Equal Opportunity Employer

| COACHING POSITION APPLICATION   |  |                 |                  |             |
|---------------------------------|--|-----------------|------------------|-------------|
| Please print or                 | type Date                                  |                 |                  |             |
| Mana                            |  | Security Number | •                |             |
| Name<br>Last                    | First                                      |                 | Middle           | <del></del> |
| Address I may be contacted      |  | Work Phone      |                  |             |
|                                 |  |                 |                  |             |
|                                 | olied for:<br>t a separate application for | each position)  |                  |             |
| Employment                      | History and Other Relevant                 | Work Experience | ce & Achievement | S           |
| Dates<br>Employed<br>From<br>To | Employer                                   | Position        | Supervisor       | Telephone   |
|                                 |  |                 |                  |             |
|                                 |  |                 |                  |             |
|                                 |  |                 |                  |             |
|                                 |  |                 |                  |             |
| Civic and Co                    | mmunity Affiliations                       |                 |                  |             |
|                                 |  |                 |                  |             |

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 and 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.

|  | Academic | and Pr | ofession | nal Training |
|--|----------|--------|----------|--------------|
|--|----------|--------|----------|--------------|

| HighSchool/<br>College/University and<br>Location | Major/Minor Areas | Degree Granted | Year |
|---|-------------------|----------------|------|
|   |                   |                |      |
|   |                   |                |      |
|   |                   |                |      |
|   |                   |                |      |

| Ref | $\sim$ | or |     | 10 |
|-----|--------|----|-----|----|
| KEI | CI     | CI | ıct | :5 |

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.

| Applicant Signature                     | Date |
|---|------|
| • |      |