

## SAU #68 LINCOLN-WOODSTOCK COOPERATIVE SCHOOL DISTRICT



PO Box 846, 78 Main St., Unit 3, Linwood Plaza Lincoln, NH 03251

Professional License or Certification (attach copy):\_

Telephone (603) 745-2051 Fax (603) 745-2352

EMPLOYMENT APPLICATION							
Application Date:							
<b>General Information</b>							
Last Name:		_ First Name:Middle Int:_					
Social Security Number:		Date of Birth:					
Physical Address:							
Mailing Address:							
Home Phone: Cell Phone:							
Email Address:							
Position Applying For: Teacher/Specialist Coach	Administrator	or Office Personnel					
•	Custodian	Office I craomici					
Aide	Custodian	Substitute					
		Other (specify)					
Are you able to legally work i	n the United States?	YES NO					
Are you able to perform the e without accommodations? YE		the position, with or					
Education / Certification	n / Skills						
High School:	Years Attended:	Diploma/Degree Awarded, Major/Minor:					
College:	Years Attended:	Diploma/Degree Awarded, Major/Minor:					
College:	Years Attended:	Diploma/Degree Awarded, Major/Minor:					
(Attach transcripts. Teacher applica	ations must have official trai	anscripts sent.)					

NH Educator Certification:				
Endorsement #	Expiration Date:			
Endorsement # Expiration Date:				
NH EID# (if applicable):				
Additional Skills Relevant to Positio maintenance/carpentry skills, etc.):		ce equipment, maintenance equipment,		
Coaching Applicants Only:				
Playing Experience Sports: Sport:	Level of Play:	Location(s):		
Previous Coaching Experience: Sport:	Level of Plan:	Location(s):		
		positions, in which you are interested (i.e.		
•	c, Community Organizations, & Any	y Position Held:		
Professional References				
Please list three (3) references, incl	veness in the workplace. The appl	u have worked, these people should have licant is responsible to have reference		
Organization Name:	Organization Name: Contact's Name:			
Position:	Telephone #:	Years Known:		
Email Address:				
Address:				

2. Organization Name: Contact's Name:					
	Position:	Telephone #	:	Years Known:	
	Email Address:				
	Address:				
3.	Organization Name:	C	ontact's Name:		
	Position:	Telephone #:	:	Years Known:	
	Email Address:				
	Address:				
	mployment History ease list most recent position first. If currently	employed, end date	e and reason may be left blank	:)	
Or	ganization Name:				
Ad	ldress:				
	sition Held:				
De	escribe Position Responsibilities:				
Employment Start Date: End Date: Reason for Leaving:					
Supervisor Name:					
Supervisor Contact Phone/Email:					
Ma	ay We Contact This Employer: YES	NO			
Or	ganization Name:				
Ad	ldress:				
	sition Held:				
De	escribe Position Responsibilities:				
En	nployment Start Date: End [				
Su	pervisor Name:				
Su	pervisor Contact Phone/Email:				
Ma	ay We Contact This Employer: YES	NO			

Organization Name:					
Address:					
Position Held:	Full-Time Part-Time				
Describe Position Responsibilities:					
Employment Start Date: End Date:	Reason for Leaving:				
	Treason for Leaving.				
Supervisor Contact Phone/Email:					
May We Contact This Employer: YES NO					
	If Yes, Dates				
I hereby certify that the facts set forth in the above employment application are true and complete to the best of my knowledge. I understand that if employed, falsified statements on this application shall be considered sufficient cause for dismissal.					
Signed:	gned: Date:				
	y consent that any bonafide law enforcement agency be documents relating to my prior positions of employment documentation that may address my background.				
I understand information gathered by any law enforcement agency will become property of the School Administrative Unit #68 and will not be disclosed to myself and may not be disclosed to any other person or police department without my express consent.					
I agree that a copy of this authorization can be accept	ed with the same authority as the original.				
Signed: Date:					
Applications remain on file until December 31 of each year.					
OFFICE USE ONLY					
Date of Hire:	Date Approved by Board:				
Date of Reference Check:	Date of Background Check:				
Rate of Pay: First Day of Work:	Number of Hours per day:				
Position (be specific):					
Employer Signature:					