

# HAMPDEN-WILBRAHAM REGIONAL SCHOOL DISTRICT

621 Main Street, Wilbraham, Massachusetts 01095

Phone: (413) 596-3884 FAX: (413) 599-1328

## Application for Substitute Teaching

Qualified applicants are considered for all positions without regard to race, color, religion, sex, national origin, age, marital status, or the presence of a non-job-related medical condition or handicap.

It is unlawful in Massachusetts 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 liability.

**INSTRUCTIONS:** Please read the application for employment carefully and answer EVERY question in full. If you cannot answer or do not understand any part of this application notify the School Department representative immediately. If you need additional space to complete an answer, please attach additional sheets containing the information to this application. In addition, to the information required below, please provide any other information you think would be helpful to us in considering you for employment. You may exclude all information indicative of age, sex, race, religion, color, national origin, handicap, gender identity, and sexual orientation.

**NOTE:** ANY FALSE STATEMENT OR OMISSION MAY DISQUALIFY AN APPLICANT FROM FURTHER CONSIDERATION FOR EMPLOYMENT AND MAY BE CONSIDERED JUSTIFICATION FOR IMMEDIATE **DISMISSAL**, IF DISCOVERED AT A LATER DATE.

**PLEASE PRINT**

Last Name	First Name	Middle Name	Date of Application	
Address: Number	Street	City	State	Zip Code
Telephone No. (____) _____		Social Security Number: _____ / _____ / _____		
Email address: _____				
How were you referred to us?				
<input type="checkbox"/> Newspaper Ad _____		<input type="checkbox"/> Employment Agency _____		
<input type="checkbox"/> Friend _____		<input type="checkbox"/> Relative _____		
<input type="checkbox"/> Employer _____		<input type="checkbox"/> Other _____		
Name of Referral Source: _____				
What is your minimum salary requirement? \$ _____				
Date available to begin work: _____ Are there any limitations to your availability? _____				
Positions(s) applied for: _____				
<b>A. Elementary Teacher</b>		<b>B. Secondary Teacher</b> 7-8 _____ 9-12 _____		
1. _____		1. _____		
2. _____		2. _____		
3. _____		3. _____		

**C. Special**

(Art, Music, Physical Education, Ind. Arts, Vocational, Special Needs)

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_

**D. Administrative**

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_

Certification Status: \_\_\_\_\_

If certified, please state number and code: \_\_\_\_\_

(Copy of certification(s) must be submitted.)

**Educational Data:** (College and graduate level transcripts must be submitted.)

School Name and Location	Dates	Course of Study	Did you Graduate?	Degree or Diploma
Graduate/ Professional	From _____ To _____			
College	From _____ To _____			
High School	From _____ To _____			
Other	From _____ To _____			

**Military Service:** If you have ever served in any branch of the Armed Forces, including the Reserves, complete the following:

Branch	Place & Date of Discharge
Any Special Training or Skills	Duties performed:
Reserve Obligations: (List Branch & Unit) _____	

**Employment/Teaching Experience\*** List present or most recent employer first. List all full-time and part-time employment held in the past ten (10) years. You may include any verified work performed on a volunteer basis. Continue on a separate sheet, if necessary.

\* Please include whether student teaching, regular contract, substitute, part time, etc.

1	Employer	Dates Employed		Job Duties & Responsibilities*
		From	To	
	Address			
	Telephone	Salary		
	Job Title	Start	Finish	Supervisor
	Reason for Leaving	DO NOT CONTACT _____ Reason		

2	Employer	Dates Employed		Job Duties & Responsibilities*
		From	To	
	Address			
	Telephone	Salary		
		Start	Finish	
	Job Title	Supervisor		
	Reason for Leaving	DO NOT CONTACT _____ Reason		
3	Employer	Dates Employed		Job Duties & Responsibilities*
		From	To	
	Address			
	Telephone	Salary		
		Start	Finish	
	Job Title	Supervisor		
	Reason for Leaving	DO NOT CONTACT _____ Reason		
4	Employer	Dates Employed		Job Duties & Responsibilities*
		From	To	
	Address			
	Telephone	Salary		
		Start	Finish	
	Job Title	Supervisor		
	Reason for Leaving	DO NOT CONTACT _____ Reason		

**General Information:** (Please circle YES or NO)

Are you under 18 years of age? Yes No  
 Have you ever applied here before? Yes No If yes, when? \_\_\_\_\_  
 Have you ever worked here before? Yes No If yes, when? \_\_\_\_\_  
 and why did you leave? \_\_\_\_\_

Are you a United States citizen or authorized to work in the United States? Yes No

**YOU WILL BE REQUIRED TO PRODUCE DOCUMENTATION TO ESTABLISH YOUR IDENTITY AND YOUR AUTHORIZATION TO WORK IN THE UNITED STATES.**

Are you presently on lay-off and subject to recall? Yes No

Has any of the following happened to you in the last ten (10) years? Yes No

- 1- Fired from job
- 2- Quit a job after being told you would be fired
- 3- Left a job by mutual agreement following allegations of misconduct
- 4- Left a job by mutual agreement following allegations of unsatisfactory performance
- 5- Left a job for other reasons under unfavorable circumstances

Explain the reason your employment was ended. Use a separate sheet of paper.

Should you be offered employment, would you consent to a medical examination, as a condition of employment, conducted solely for the purpose of determining whether you are, with reasonable accommodation, capable of performing the essential functions of the job? Yes No

Do you possess any other experience, skills, or qualifications which you feel would be especially useful for work with the Hampden-Wilbraham Regional School District? Yes No

If yes, provide details: \_\_\_\_\_

**Personal References:** (Not former employers or relatives) who have first-hand knowledge of your character, personality and/or teaching ability.

NAME/OCCUPATION	ADDRESS	TELEPHONE NO.

**SEALED RECORD NOTICE: READ CAREFULLY**

An Applicant for employment with a sealed record on file with the Commissioner of Probation may answer “no record” with respect to an inquiry herein relative to prior arrests, criminal court appearances, or convictions.

In addition, any applicant for employment may answer “no record” with respect to any inquiry relative to prior arrests, court appearance, and adjudication in all cases of delinquency or as a child in need of services which did not result in a complaint transferred to the superior court for criminal prosecution.

The Hampden-Wilbraham Regional School District has been certified by the Criminal History Systems Board for access to conviction data. Record checks are conducted on all finalists.

Please provide the following information unless it has been officially annulled, expunged, or sealed by a court:

Have you ever been convicted of a felony?     Yes     No

If yes, provide full details:

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Were you ever imprisoned for a felony conviction?     Yes     No

If yes, where and when? \_\_\_\_\_

Were you ever convicted of a misdemeanor within the past (5) years with the exception of a first conviction for drunkenness, simple assault, speeding, minor traffic violations, affray or disturbance of the peace?     Yes     No

If yes, provide full details:

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**Agreement: PLEASE READ THE FOLLOWING STATEMENTS CAREFULLY.**

I hereby affirm that I have read and understand this application and that the information which I have provided on this application (and accompanying resume, if any) is true and complete to the best of my knowledge. I agree that any omission or falsified information may disqualify me from further consideration for employment and may be considered justification for my immediate **dismissal** if discovered at a later date.

The Hampden-Wilbraham Regional School District is certified by the Criminal History Systems Board for access to conviction data. Record checks are conducted on all finalists. Be advised that under Massachusetts law, as a condition of employment with the Hampden-Wilbraham Regional School District you will be subject to fingerprinting for the purpose of state and federal background reviews. I hereby authorize all persons, schools, current employer (if applicable) and previous employers and other organizations named in this application (and accompanying resume, if any) to provide the Hampden-Wilbraham Regional School District with any information that may be helpful in arriving at an employment decision. I hereby release said persons and entities and the Hampden-Wilbraham Regional School District from any and all liability for providing this information.

I understand this application is valid for one year from the date of application.

Signature

Date

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