Er	nployer Revie	w:	
	Cori/Date		
	Two Forms of	f ID	
Se	ent to:		
] Elementary [Second	dary

HADLEY PUBLIC SCHOOLS

125 Russell Street Hadley, MA 01035 1-413-586-0822

	APPLICATION FOR SUBSTITUTE TEACHERS					
PERSONAL DATA Date:						
Name	_	Phone				
Address:						
City:	State:		Zip:			
Email address:						
Are you certified in Massachusetts? No Yes, your certification #is PLEASE PROVIDE A COPY OF DOE CERTIFICATION Are you certified in any other state? No Yes, Where?						
Education				_		
Name of Institution	Major	Degree	Date			
	Major Major	Degree Degree	Date			
Name of Institution						
Name of Institution Name of Institution				Dates		

Related Work Experience						
Place	Position		Dates			
Place	Position		Dates			
References: Please list three professional reference	es:					
1.						
Name	Address	Telephone				
2						
Name	Address	Telephone				
3Name	Address	Telephone				
On what days are you available? At what grade levels would you be willing to substitute?						
ELEMENTARY/SECONDARY? Elementary:						
Would you be willing to substitute in Art Music Gyr						
Secondary: ☐ 7-8						
Field of Concentration						
In what subjects do you feel most qualified?						
Are there any areas in which you wou	uld not be willing to substitute	?				

Are you a citizen of the United States of America? Yes NO If you are not a citizen of the U. S., are you authorized for employment in the U.S.?
In the event that you are offered employment, you will be required to give written permission to conduct a C.O.R.I. (Criminal Offender Records Inspection). The School System's offer of employment will be contingent on the results of the School System's review or your criminal record information. After employment, if C.O.R.I. information shows that you are not suitable for continued employment in your position, your employment will be terminated.
I understand that Massachusetts laws may require that at some point in the hiring process the information contained in this application be made available to the public, and that the facts set forth herein will be subject to verification.
Applicant's Signature Date
Hadley Public Schools is committed to maintaining a work and learning environment free from discrimination on the basis of race, color, religion, national origin, pregnancy, gender identity, sexual orientation, marital/civil union status, ancestry, place of birth, age, citizenship status, veteran status, political affiliation, genetic information or disability, as defined and required by state and federal laws.

who participate in an equal opportunity investigation.

Please return completed application to: Hadley Public Schools

125 Russell Street Hadley, MA 01035 Tel: (413) 586-0822

A complete application consists of the following:

Additionally, we prohibit retaliation against individuals who oppose such discrimination and harassment or

- 1. A completed application form
- 2. CORI Form Completed
- 3. A copy of the following proofs of identification:
 - a. Driver's License <u>or</u> Passport (*only one is required*) If you do not have either one for (a) you must have both identifications for (b).
 - b. Birth Certificate and Social Security Card