

Greater Lowell Technical High School



Return to office of
Human Resources
(978) 454-5411

250 Pawtucket Boulevard
Tyngsboro, MA 01879

Application for Employment

Name: _____

For a position as: _____

It is the policy of the Greater Lowell Technical High School District not to discriminate, nor will it tolerate harassment, on the basis of race, color, religion, age, marital status, pregnancy, citizenship, national origin, handicap or disability, genetic information, veteran or military status, sex, gender identity, or sexual orientation, in its educational programs, activities, or employment. Additionally, we prohibit retaliation against individuals who oppose such discrimination and harassment or who participate in an equal opportunity investigation

Greater Lowell Technical High School commits to ensure students' readiness for career, college, and citizenship in the 21st century. We challenge and support students as they realize their individual potential for personal and professional success.

Personal Information-Section I

1. Name (in Full) _____
2. Present address: _____
3. Home Phone # _____ Mobile Phone #: _____ Email: _____
4. Emergency Contact person: _____ Tele. # _____
5. Did you serve in the armed forces for the United States: Yes No If yes, Branch _____
6. Are you currently receiving a retirement allowance from a public retirement system in Massachusetts? Yes No
a.) If yes, please state the name of the retirement board; for example, MA State Teachers': _____
7. In accordance with the Immigration Reform and Control Act of 1986, you will be required to provide acceptable forms of identification to establish your identity and eligibility to work in the U.S. upon employment.
a.) Are you authorized to work in the United States: Yes No B.) Are you under age 18: Yes No
8. Have you ever been dismissed or asked to resign from a position? Yes No If yes, please provide full detail: _____

9. Do you have any relatives, including family members, who are currently employed by Greater Lowell Technical High School or serve on the Greater Lowell Technical High School, School Committee? Yes No
a.) If yes, please provide their name(s) and relationship to you.
Relative(s) Name(s): _____
Relationship to you: _____
10. Are you licensed as an educator in Massachusetts: Yes No (Certificate#) _____
a) If yes, please indicate level: Preliminary Initial Professional Temporary
b) If yes, please include a copy of your educator's license with this application.
c) If licensed, areas of Licensure: _____
d) If no, have you made an application for licensure? _____ When: _____
e) Have you successfully completed teacher training? Yes No If yes, when? _____
11. Do you possess an educator's license in any state other than Massachusetts? Yes No
a) If yes, what state(s)? _____ License No.: _____

EMPLOYMENT HISTORY-PLEASE LIST IN CHRONOLOGICAL ORDER-MOST RECENT FIRST

1. Name of Employer: _____
Address: _____
Title: _____ Supervisor's Name/tele#: _____
Dates of Employment: From: _____ to: _____ Reasons for leaving: _____
Salary: _____
2. Name of Employer: _____
Address: _____
Title: _____ Supervisor's Name /Tele#: _____
Dates of Employment: From: _____ to: _____ Reason for leaving: _____
Salary: _____

3. Name of Employer: _____
Address: _____
Title: _____ Supervisor's Name /Tele#: _____
Dates of Employment: From: _____ to: _____ Reason for leaving: _____
Salary: _____

4. Name of Employer: _____
Address: _____
Title: _____ Supervisor's Name/Tele#: _____
Dates of Employment: From: _____ to: _____ Reason for leaving: _____
Salary: _____

5. Name of Employer: _____
Address: _____
Title: _____ Supervisor's Name/Tele#: _____
Dates of Employment: From: _____ to: _____ Reason for leaving: _____
Salary: _____

Educational Background-Section III

1. High School Name: _____
Address: _____
Diploma _____

2. College/University Name: _____
Address: _____
Degree: _____ # of Credits: _____

3. Graduate School Name: _____
Address: _____
Degree: _____ # of Credits: _____

4. Post-Graduate: _____
Address: _____
Degree/Certificate: _____

5. Specialized/Technical training: _____
Address: _____
Course(s): _____
Certificate: _____

Note: College Transcripts must be submitted with this application for posted **instructor** positions. On a separate sheet of paper, add any additional information that will give us a more complete estimate of your training, experience, and ability.

6. Do you speak another language? Yes No If yes, which? _____

7. Do you possess any specialized trade license? If so, list. _____

8. Please list any computer software in which you are proficient or certified, if relevant to the position you are seeking:

9. List all extra -curricular activities you participated in or could direct or coach successfully: _____

10. List all other documented volunteer activities that you wish to include in your application. You do not need to list any organizational names that would indicate possible membership in a protected class such as race, color, religion, sex, etc.

Professional References-Section IV

Please list three persons such as superintendents, principals, supervisors and/or others who closely observed your work or supervised you directly. In absence of a supervisor or someone who observed your work, please list three non-related individuals that have known you for at least one year and have direct knowledge of your work experience, ethic, and character.

1. Name: _____ Title: _____
Telephone #: _____ Relationship: _____

2. Name: _____ Title: _____
Telephone #: _____ Relationship: _____

3. Name: _____ Title: _____
Telephone #: _____ Relationship: _____

Applicant Release-Section V-Please read carefully

The information provided in this application for employment is true, accurate and complete to the best of my knowledge. In the event of employment, I understand that false, misleading information or omissions, in this application or interview, may result in rejection of my application or if hired, termination from employment, regardless of the time elapsed before discovery. Also, if hired, I understand that I am required to abide by all rules and regulations by the Greater Lowell Technical High School.

I authorize investigation of all statements contained in this application and accompanying documents and the release of any information regarding my education, past employment history and background. I authorize the Greater Lowell Technical High School to obtain any information from schools, employers or individuals relating to my activities. This information may include, but is not limited to: academics, achievement, performance, attendance, personal history and discipline. Further, I hereby authorize all references, persons, schools, current and former employers (if applicable) and organizations named in this application, unless otherwise stated, to provide the Greater Lowell Technical High School any relevant information that may be required to arrive at an employment decision. I understand that the information released is for the Greater Lowell Technical High School's use only.

I understand that no representative from the school district has any authority to enter any agreement for employment for any specified time or to assume any benefits or terms and conditions of employment other than those set forth in any applicable labor agreement or in correspondence from the Superintendent's Office.

I hereby voluntarily release, discharge and exonerate the Greater Lowell Technical High School, its agents and representatives, and any person so furnishing information from any and all liabilities of every nature and kind arising out of the furnishing or inspection of such documents, records, and other information or the investigation made by on or behalf of the school district.

If required for the position I am seeking, I understand and agree to a physical examination which may require a drug screen and recognize that any offer of employment may be contingent upon the satisfactory results of such examination.

I understand that any employment offer by the school district is conditional upon my ability to establish employment eligibility under the Immigration Reform and Control Act of 1986 within three days of employment.

I understand that a criminal record check and finger-print based state and national criminal history check will be conducted to determine suitability for employment and any fee associated with the national fingerprint background check will be the responsibility of the individual.

I represent that I have read and fully understand the foregoing and seek employment under these conditions. A copy of this release of information may be accepted as an original. I understand that any offer of employment is conditional subject to verification of the information I have provided in this application or information provided during an interview or discussion with the School.

MGL Chapter 151B prohibits employers from (1) terminating or refusing to hire individuals on the basis of genetic information; (2) requesting genetic information concerning employees, applicants, or their family members; (3) attempting to induce individuals to undergo genetic tests or otherwise disclose genetic information; (4) using genetic information in any way that affects the terms and conditions of an individual's employment; or (5) seeking, receiving, or maintaining genetic information for any non-medical purpose.

"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".

ELECTRONIC SIGNATURE: Typing your name in the signature line and placing a check in the box constitutes a legal signature. You agree that all statements you provided are true; any false or misleading information in my application or interview may result in termination if hired.

Applicant's Signature: _____ Check Box Date: _____