

Spaulding Academy & Family Services Employment Application

72 Spaulding Road, Northfield, NH 03276 ~ 603.286.8901 ~ www.spauldingservices.org

Applicants are considered for all positions without regard to race, color, religion, sex, national origin, age, disabilities, marital or veteran status.

(PLEASE PRINT LEGIBLY)	Date of Applica	ation:	
Position(s) Applied For:			
Pay expected:			
Nama			
NameLast	First	Middle	
Address			
Number Street	City	State	Zip Code
Telephone: ()	_Are you 21 years of age or ove	er:(Subje	ect to verification)
Business Tel. No. ()	Email address:		
How long at present address?	Previous addres	SS:	
Have you filed an application here b	before? O Yes O No	If Yes, give dates	
Have you ever been employed here	before? OYes ONo	If Yes, give dates	
Are you employed now? O Yes	O No May we contact	t your present employ	yer? O Yes O No
Relatives and friends working for us	s :		
Were you referred by a current staff	member? O Yes O No Staf	ff Name:	
Are you a U.S. citizen or legally aut	thorized to work in this country?	Yes O No	
On what date would you be availabl	le for work?		
Are you available to work	ll Time 🗌 Part Time 🔲 S	Shift Work Ter	mporary
Are you on a lay-off and subject to	recall? O Yes O No		
Are you willing to take a physical e	xamination at Spaulding's expen	nse? O Yes	O No
Are you able to perform the essentia	al functions of the job for which	you are applying, wi	th or without a reasonable

accommodation? ___Yes ___No

In case of emergency who should be contact:_	Tel No		
HAVE YOU EVER BEEN CONVICTED OF BEEN ANNULLED BY A COURT?			RIME THAT HAS NOT
If yes, when and explain the circumstances (th employment):			n consideration for
Valid Driver's License held in (State)			
Do you own your own vehicle? O Yes	O No		
Education – You must meet the min the position description		-	ted on
Elementary High Sch	nool	College University	Graduate/Professional
School Name			
Years Completed (Circle) 43678 91011	12	(1234)	1234
Diploma/Degree			
Described Course of Study			
Describe specialized training and skills:			
List certifications:			
List professional, trade, business or civic activ religion, sex, national origin, age, disabilities,	ities held: (You ma	ay exclude those which	indicate race, color,
State any additional information you feel may	be helpful to us in	considering your applic	cation:

Employment History

Start with your present or last job. Include military service assignments and volunteer activities.

	•	inally service assignments and	
Employer	Telephone	Dates Employed	Work Performed
1 5		From To	
A 11			
Address			
Job Title			
Supervisor			
Reason for Leaving			
6			
Employer	Telephone	Dates Employed	Work Performed
Employer			Work I enformed
	()	From To	
Address			
Job Title			
Job The			
Supervisor			
Reason for Leaving			
Reason for Leaving			
Employer	Talanhana	Dates Employed	Work Performed
Employer	Telephone		work renomed
		T T	
	()	From To	
Address	()	From To	
Address	()	From To	
	()	From To	
Address Job Title	()	From To	
	()	From To	
Job Title	()	From To	
Job Title Supervisor	()	From To	
Job Title	()	From To	
Job Title Supervisor	()	From To	
Job Title Supervisor Reason for Leaving	()		Work Performed
Job Title Supervisor	() Telephone	Dates Employed	Work Performed
Job Title Supervisor Reason for Leaving Employer	() Telephone ()		Work Performed
Job Title Supervisor Reason for Leaving	() Telephone ()	Dates Employed	Work Performed
Job Title Supervisor Reason for Leaving Employer	() Telephone ()	Dates Employed	Work Performed
Job Title Supervisor Reason for Leaving Employer Address	() Telephone ()	Dates Employed	Work Performed
Job Title Supervisor Reason for Leaving Employer	() Telephone ()	Dates Employed	Work Performed
Job Title Supervisor Reason for Leaving Employer Address Job Title	() Telephone ()	Dates Employed	Work Performed
Job Title Supervisor Reason for Leaving Employer Address Job Title	() Telephone ()	Dates Employed	Work Performed
Job Title Supervisor Reason for Leaving Employer Address Job Title Supervisor	() Telephone ()	Dates Employed	Work Performed
Job Title Supervisor Reason for Leaving Employer Address Job Title	() Telephone ()	Dates Employed	Work Performed

If you need additional space, please continue on a separate sheet of paper.

Give name, e-mail address and telephone number of three work-related (supervisor) references. We have an electronic reference checking process that you will be asked to participate in if you are selected for a position.

Applicant's Statement

The answers to all questions on this application are true and correct to the best of my knowledge. I understand that falsification of statements on this application can be a cause for dismissal. I understand that as part of normal employment procedure, an inquiry of references and criminal background checks will be made. I authorize such investigation and the giving and receiving of any information requested by Spaulding Academy & Family Services and release from liability any person giving or receiving any information. I have the right to make a written request within a reasonable period to receive additional detailed information about the nature or scope of an investigation which is made.

Required Signature

Date

This organization reserves the right to revise or eliminate job duties and responsibilities in its sole discretion. This application does not constitute and should not be considered as a written or implied offer or contract of employment. Rules, policies, and terms of employment will be furnished if you are hired.

FOR HUMAN RESOURCES DEPARTMENT USE ONLY PLEASE MAKE COMMENTS SO THAT OTHERS ARE ABLE TO UNDERSTAND THE STATUS OF APPLICATION

Hiring Approvals:	For What Position:	Starting Date:	
	Starting Salary:	Supervisor:	
Required Signatures			
Supervisor:		Date:	
Department Head:		Date:	
Chief Executive Off	icer:	Date:	