

Application for Employment
Woburn Public Schools
55 Locust Street
Woburn, MA 01801

Date: _____

Please check position(s) applying for:

Full Time Teaching ___ **Substitute Teaching** ___ **Paraprofessional** ___
Lunch Monitor ___ **Sub Lunch Monitor** ___ **Secretarial** ___ **Sub Secretary** ___
Custodian ___ **Sub Custodian** ___

First Name: _____

Middle Initial: _____

Last Name: _____

Current Address: _____

Permanent Address: _____

Home Phone: _____

Mobile Phone: _____

Business Phone: _____

Date of Birth: _____

Social Security No: _____

Spouse: _____

Position Desired: _____

Present Position: _____

Salary: _____

Certified: _____

Certification Number: _____

Are you under contract for the next school year? _____

Why do you desire to leave your current position? _____

Are you a citizen of the United States? _____

General Health: _____

How much time did you lose from work during the past year due to illness?

Do you have any physical, mental or medical impairment that would limit your job performance? _____ If yes, please explain: _____

Have you ever been convicted of a felony? _____ If yes, please explain:

This application is to be submitted with three (3) letters of recommendation, complete college transcripts, birth certificate, marriage certificate and a copy of a TB Test.

Upon hiring, the following must occur before you begin employment:

- A physical exam by a doctor specified by the City of Woburn
- A drug and alcohol test
- A CORI report

We appreciate your interest in the Woburn Public Schools.