

**Bourne Public Schools**  
36 Sandwich Road, Bourne, MA 02532  
508.759.0660 Fax 508.759.1107  
[www.bourne.k12.ma.us](http://www.bourne.k12.ma.us)

**Application for Employment**  
**Non-Instructional**

Position Sought: \_\_\_\_\_

Last:	First:	Middle:
Address:		
Telephone:	Phone:	Email:

I certify that the information contained in this application is correct and complete to the best of my knowledge and understand that inquiries may be made in processing this application. If hired, I understand that any false statement could result in dismissal.

**Education**

	High School/Trade School	College or University	Graduate/Professional	Additional High Education
School Name City and State				
Years Completed				
Diploma/Degree				
Course of Study Major/Minor				

**Professional Licenses and Certifications (if applicable)**

License / Designation	Number	Date Attained	Issuing State

**References**

List here the names of those individuals who have supervised your previous work experience.

Name	Title and Company	Primary Number

*Bourne Public Schools does not discriminate on the basis of age, gender identity, disability, sex, race, color, religion, sexual orientation or national origin.*

**Employment Experience**

Start with your present or last position. If you need additional space, please continue on a separate sheet of paper.

<b>1</b>	Employer	phone# (    )	Dates Employed		Work Performed
			From	To	
	Address				
	Job Title		Hourly Rate/Salary		
	Name and Title of immediate Supervisor		Starting	Final	
	Reason for Leaving				
<b>2</b>	Employer	phone# (    )	Dates Employed		Work Performed
			From	To	
	Address				
	Job Title		Hourly Rate/Salary		
	Name and Title of immediate Supervisor		Starting	Final	
	Reason for Leaving				
<b>3</b>	Employer	phone# (    )	Dates Employed		Work Performed
			From	To	
	Address				
	Job Title		Hourly Rate/Salary		
	Name and Title of immediate Supervisor		Starting	Final	
	Reason for Leaving				

**To All Applicants:**

During the course of the staff selection process, it is possible that the information you have submitted in support of your candidacy will be reviewed by professional employees of the Bourne Public Schools other than those to whom it was originally addressed, School Committee members of a screening committee who are not employees of the Bourne Public Schools. Your consent is needed before such a review can take place.

I hereby agree to a review of my application folder by any individual or group of individuals involved in the staff selection process.

I hereby affirm that all information supplied by me in support of my candidacy is true and complete.

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

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