



MASSACHUSETTS ASSOCIATION OF REGIONAL SCHOOLS

Application of Employment Massachusetts Association of Regional Schools

Name: _____

Address: _____

Home Phone: _____ Cell: _____

Social Security No.: _____ Are you a citizen of the United States? Yes No
Circle

Positions Applying for: _____

Please attach a resume which provides information for the following:

Education Teaching Experience Administration Experience Work other than in Education

I certify that the facts set forth in this application for employment are true and complete to best of my knowledge. I understand that if I am employed, false statement, omission, or misrepresentations may result in my dismissal. I authorize the Massachusetts Association of Regional Schools to make an investigation of any facts set forth in this application.

Signature: _____ Date: _____

Return application and resume to: