

FALL MOUNTAIN REGIONAL SCHOOL DISTRICT

General Employment Application

Position Applied For: _____

This application form MUST be completed in its entirety. You may use a resume to add to or elaborate on any information provided in this application.

Full Name: _____ Date: _____

Address: _____
Street Address City State Zip

_____ *Mailing Address City State Zip*

Phone: _____ E-mail: _____

Citizenship: US _____ Other _____

Have you ever been convicted and/or found guilty by a court of competent jurisdiction in this or another state of a felony that has not been annulled by a court? If yes, please explain on the back of this application.	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Have you ever worked for Fall Mountain Regional School District? If so, when and in what position(s):	YES <input type="checkbox"/>	NO <input type="checkbox"/>
Do you hold New Hampshire State Certification? (Enclose Copy)	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Endorsement area(s): Expiration Date:		

**Education: List in Chronological Order
 (Include a copy of College/Graduate School Transcripts)**

	School & Location	Dates Attended	Diploma/Degree Granted or Number of Credits Earned
High School			
College/University			
Other Education			

FALL MOUNTAIN REGIONAL SCHOOL DISTRICT

Previous Employment

Company/Location	Telephone	Position Held	Dates Employed		Reason for Leaving

References: Persons who can Attest to your Qualifications for this Position.

Name	Address	Telephone	Position
1.			
2.			
3.			
4.			
5.			

FALL MOUNTAIN REGIONAL SCHOOL DISTRICT

I certify that the above information is true and complete to the best of my knowledge and belief. I understand any statement I have furnished which is shown to be false when made will be cause for disregard of this application, or will be cause for my immediate dismissal if I have been hired. I authorize Fall Mountain Regional School District to conduct any and all inquiries that it may deem necessary or advisable to verify the information provided by me and/or to supplement this information. I authorize any former employer, or any other person, firm, corporation, credit agency, or government agency to provide Fall Mountain Regional School District with any information concerning me. In addition, I release such employer, person, firm, corporation, credit agency, or government agency from any previous agreement, verbal or written, which would prohibit the release of information pertinent to my application for employment within Fall Mountain Regional School District. I release and hold harmless Fall Mountain Regional School District, its school district, and such providers of information about me from any liability which results from the furnishing and review of this information.

Signature: _____ Date: _____

TITLE IX COMPLIANCE STATEMENT

This school district receives federal financial assistance. In order to continue receiving such federal financial assistance, this school district will not discriminate in their educational programs, activities, or employment practices on the basis of race, language, sex, age, or, handicapping condition, under the provisions of Title IX of the 1972 Educational Amendments; Section 504 of the Rehabilitation Act of 1973.

Complaints regarding compliance with Title IX regulations should be submitted in writing to the Title IX liaison for N.H. School administrative Unit 60, Superintendent's Office, PO Box 600, Charlestown, NH 03603.

Debra Livingston, Superintendent of Schools

FALL MOUNTAIN REGIONAL SCHOOL DISTRICT IS

FALL MOUNTAIN REGIONAL SCHOOL DISTRICT

AN EQUAL OPPORTUNITY EMPLOYER