## **Tewksbury Public Schools**

## **Food & Nutrition Services Employment Application**

Notice to Applicant: We are an equal opportunity employer and do not discriminate on the basis of an applicant's or employee's race, color, religion, sex, national origin, citizenship, age, physical or mental disability or any other characteristic.

	(Please Print)		
Name:		Social Securi	ty: (required upon hiring)
Name:(Last)		)	
Address:			
City:	State: Zip:	Phone: (	)
Email:	_		
Personal Information	(Please Print)		
Position Applied For:		Alexander.	
Department / Group:			
Have you ever worked for the T	own of Tewksbury	If so, date(s):	
Prior Position(s):			
Reason(s) for Leaving:			
List from Present to Past			
School/Institution	Major or Area of Study	Graduate Yes No	Year Graduated
	Major or Area of Study	Graduate Yes No	Year Graduated
	Major or Area of Study	Graduate Yes No	Year Graduated
	Major or Area of Study	Graduate Yes No	Year Graduated
School/Institution			Year Graduated
School/Institution	Major or Area of Study  (Please Print) List Current		Year Graduated
School/Institution	(Please Print) List Current		Year Graduated
School/Institution  Employment History  From	(Please Print) List Current	First	
School/Institution  Employment History  From Current:	(Please Print) List Current	FirstTelephone: (	
Employment History  From Current:	(Please Print) List Current	FirstTelephone: (	
School/Institution  Employment History  From Current: Address:	(Please Print) List Current	FirstTelephone: (	
School/Institution  Employment History  From Current: Address: From Previous:	(Please Print) List Current To	Telephone: (	

FromTo			
Previous:			
Address:			
Duties:			
References (Please Prir	nt)		
Name	Address	Telephone	Year's Known
I hereby certify that the information made a part of this application statements checked by the Town provide the Town any and all informay have. Further, I release all furnishing such information to the its agents, employees, or represe information on this application employment.	) is true and correct to the beson unless I have indicated to the primation concerning my previous parties and persons from any and the use of the transfer of the use of the transfer of the use of the transfer of transfer of the transfer of t	et of my knowledge and agree contrary. I authorize the resemble comment and any pertine and all liability for any damager disclosure of such informations falsification.	ee to have any of these references listed above to ent information that they ges that may result from ion to the Town or any of an or material omission of
Attachments:			
Applicant's Signature:		Date: _	