

Hanover Public Schools

Matthew A. Ferron
Superintendent of Schools



Thomas R. Raab, Ed.D.
Business Manager

Deborah St. Ives
Assistant Superintendent

Joan Woodward
Director of Student Services

HANOVER PUBLIC SCHOOLS APPLICATION FOR EMPLOYMENT

Thank you for your interest in the Hanover Schools. Please complete this packet by providing specific, accurate, and complete details. Please print all entries by computer or hand.

Applicants for Professional Positions (Administrator, Counselor, Psychologist, Therapist, Teacher, Tutor) must complete all portions of the application form and must attach all of the following documentation when the application is filed:

1. Application form.
2. Resume, including chronological listing of education and employment (beginning with most recent).
3. Original college transcripts.
4. Commonwealth of Massachusetts Department of Education Educator's License.
5. Handwritten personal statement reflecting your philosophy and beliefs about education in general and teaching and learning in particular.
6. Criminal Offense Record Information C.O.R.I. form.
7. Letters of Reference from immediate supervisors.

Applicants for Paraprofessional, Secretary, Clerical, Maintenance, Custodial, Van Driver, or Cafeteria Positions should complete all sections that are applicable. Additional information and materials may be submitted.

Applicants for Before and After School, Coach/Assistant Coach, Co-Curricular, Enrichment, Extended Opportunities, MCAS Remediation, or other programs should complete all sections that are applicable. Additional information and materials may be submitted.

The Hanover Schools will not discriminate against any person with regard to employment or educational opportunity on account of race, color, gender, age, disability, sexual orientation, religion or national origin. This non-discrimination applies to all persons, whether or not the individual is a member of a conventionally defined minority group.

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DATE OF APPLICATION		POSITION DESIRED	
NAME	Miss Mrs. Mr.	First	Middle
			Last
HOME ADDRESS		Number	Street
			Apt. #
		City/Town	State
TELEPHONE		Zip	
		Home	Work
EMAIL		Cellular/Other	

EDUCATION	Date of Graduation or Completion	Educational Institution	Major	Diploma Degree Certificate	State
HIGH SCHOOL					
UNDERGRADUATE					
GRADUATE					
GRADUATE					
OTHER					

Certification or License State and Number	Type or Area of Certification	License Stage	State	Expiration

1. Did you receive your teaching license as part of an undergraduate/graduate degree from a formal teacher education program?	YES	NO
2. If you completed a formal education program, please list the institution.		
3. If your teacher preparation program included student teaching, how long did you teach?	6 weeks	12 weeks
4. How many years of formal classroom teaching experience do you have (not including substitute teaching)?	1 year	
5. List language(s), other than English, in which you are proficient with level of proficiency, include Sign or Braille.		

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6. Have you ever been convicted of a felony?	YES	NO
7. Have you been convicted of a misdemeanor within the past five years (other than a first conviction for any of the following misdemeanors: drunkenness, simple assault, speeding, minor traffic violations, affray or disturbance of the peace)?	YES	NO
8. Have you completed a period of incarceration within the past five years for any misdemeanors (other than a first conviction for any of the following misdemeanors: drunkenness, simple assault, speeding, minor traffic violations, affray or disturbance of the peace)?	YES	NO
9. If the answer to question number 3 above is “yes” please state whether you were convicted more than five years ago for any offense (other than a first conviction for any of the following misdemeanors: drunkenness, simple assault, speeding, minor traffic violations, affray or disturbance of the peace)?	YES	NO

Equal Opportunity Data

In order to comply with federal reporting requirements, every school district in Massachusetts is required to report to the Massachusetts Department of Education employee data by race and ethnicity categories on an annual basis. The Massachusetts Department of Education does not report individual data to the federal government, but does report the total number of educational staff in various categories in each school.

The federal government recently changed the reporting categories for race and ethnicity and all staff members are being asked to update their information. With the new reporting categories, individuals can identify themselves by ethnic group (either Hispanic/Latino or not Hispanic/Latino) and by one or more racial groups (American Indian/Alaska Native, Asian, Black/African-American, Native Hawaiian/Other Pacific Islander, White).

1. Are you Hispanic or Latino? (choose only one)

No, not Hispanic or Latino

Yes, Hispanic or Latino

(A person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin, regardless of race.)

2. What is your race? (choose one or more)

American Indian or Alaska Native

(A person having origins in any of the original peoples of North and South America (including Central America), and who maintains tribal affiliation or community attachment.)

Asian

(A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam)

Black or African American

(A person having origins in any of the black racial groups of Africa.)

Native Hawaiian or Other Pacific Islander

(A person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands.)

White

(A person having origins in any of the original peoples of Europe, the Middle East, or North Africa)

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Experience and Employment History					
Please list all work and/or teaching (including substitute or student teaching) experience in a chronological order, starting with the most recent					
DATES		Name of Employer and Address of Employer		Title or Position	Subject Grade Level Job Description
From	To	Name	Address of Employer		
		Name			
		Street			
		City/State			
		Name			
		Street			
		City/State			
		Name			
		Street			
		City/State			
		Name			
		Street			
		City/State			

Co-Curricular, Athletic, or Recreational Experience				
DATES		Location	Type of Experience	I would be able to direct, supervise, or coach in this area.
From	To			

References				
Please provide three (3) references (other than family members). References should be people who have supervised you and/or people with whom you have worked closely. Written recommendations may be attached and will be required for candidates recommended for positions.				
DATES		Name of Reference		
From	To		Position/Title	
			Position/Title	
			Place of Business	
			Telephone(s)	
			Position/Title	
			Place of Business	
			Telephone(s)	
			Position/Title	
			Place of Business	
			Telephone(s)	

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Personal Writing Sample [Please provide a handwritten response in the space provided.]
Applicants for professional positions are requested to provide a statement reflecting philosophy and beliefs about education in general and teaching and learning in particular.

My Vision of Excellence for Public Education



I hereby certify that the facts and representations set forth in this application and resume are true and complete. I further understand and agree that, if employed, false statements on my application and/or resume constitute sufficient cause for dismissal.

Signature

Date