



HAMPTON SCHOOL DISTRICT
SCHOOL ADMINISTRATIVE UNIT 90

6 Marston Way, Hampton, NH 03842
Phone 603.926.4560 • Fax 603.926.5070

FOR OFFICE USE ONLY

Employment Application

Instructions: Print clearly in black or blue ink. Answer all questions. Sign and date the form.

NOTE: If you will require any special accommodations in order to apply for this position, please notify the Human Resource Department prior to the deadline for submitting an application for this position.

PERSONAL INFORMATION:		
First Name	Middle Name	Last Name
Street Address		
City, State, Zip Code		
Home Phone Number	Mobile Number	
Are you eligible to work in the United States? Yes ____ No ____		
If you are under age 18, do you have an employment/age certificates? Yes ____ No ____		
Have you been convicted of or pleaded no contest to a felony within the last five years? Yes ____ No ____		
If yes, please explain:		

POSITION/AVAILABILITY:
Position Applied For:
Days/Hours Available
Monday ____ Tuesday ____ Wednesday ____ Thursday ____ Friday ____ Saturday ____ Sunday ____
Hours Available: from _____ to _____
What date are you available to start work?



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EDUCATION					
School	Name/Location of School	Course of Study	Number of Years Completed	Did you Graduate?	Degree or Diploma
Graduate					
College					
Business/Trade/Technical					
High School					

Skills and Qualifications: Licenses, Skills, Training, Awards

EMPLOYMENT HISTORY:
Present Or Last Position:
Employer:
Address:
Supervisor:
Phone:
Email:
Position Title:
From: To:
Responsibilities:
Salary:
Reason for Leaving:



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Previous Position:
Employer:
Address:
Supervisor:
Phone:
Email:
Position Title:
From: To:
Responsibilities:
Salary:
Reason for Leaving:

May We Contact Your Present Employer? Yes _____ No _____

References:
Name/Title Address Phone

I certify that information contained in this application is true and complete. I understand that false information may be grounds for not hiring me or for immediate termination of employment at any point in the future if I am hired. I authorize the verification of any or all information listed above.

Signature _____

Date _____