

**NEWPORT PUBLIC SCHOOLS  
109 OLD FORT ROAD  
NEWPORT, RHODE ISLAND 02840**

**Application for Employment**

Date: \_\_\_\_\_

Position: \_\_\_\_\_

Name: \_\_\_\_\_

Last

First

Middle Initial

Address: \_\_\_\_\_

Street

City

State

Zip

Telephone: Day \_\_\_\_\_ Evening \_\_\_\_\_

E-mail: \_\_\_\_\_ Social Security #: \_\_\_\_\_

Are you currently a member of the Rhode Island Retirement System? \_\_\_\_\_

Have you ever been employed here before? Dates: \_\_\_\_\_

Have you ever filed an application here before? Dates: \_\_\_\_\_

Are you prevented from lawfully becoming employed in the United States because of visa or immigration status? \_\_\_\_\_ (Completion of an I-9 form is required for employment.)

**Certification(s):** (if applicable)

| Number | Area | Expiration Date | State |
|--------|------|-----------------|-------|
|        |      |                 |       |
|        |      |                 |       |
|        |      |                 |       |

**Education: (High School, Trade/Technical School, College, etc.)**

| Name / Address | Major / Minor | Degree Earned |
|----------------|---------------|---------------|
|                |               |               |
|                |               |               |
|                |               |               |

**Employment:**

| Name / Address | Telephone # | Dates of Service | Position |
|----------------|-------------|------------------|----------|
|                |             |                  |          |
|                |             |                  |          |
|                |             |                  |          |

Are you employed now? \_\_\_\_\_

May we contact your present employer for a reference? \_\_\_\_\_

If yes, provide the following:

Name: \_\_\_\_\_ Title: \_\_\_\_\_

Address: \_\_\_\_\_ Telephone: \_\_\_\_\_

**AFFIRMATIVE ACTION / EQUAL OPPORTUNITY EMPLOYER**

Newport Public Schools does not discriminate on the basis of race, color, national origin, age, sex, or disability in admission to, access to, treatment in, or employment in its programs and activities.

Signature Section

I fully understand and agree that during the staff selection process my application materials may be reviewed by Newport School Department professional employees and school committee members other than those to whom this application was originally addressed. Moreover, I fully understand and agree that, if hired, my application materials will become part of my permanent record and that any misstatements, misrepresentations, or omission of facts in my application or interview may constitute grounds for disqualification of my application or for discharge if I have been employed. Furthermore, I understand and agree that any individual contacts between myself and any member of the Newport School Committee may constitute grounds for disqualification of my application.

I do hereby give permission for the release of my educational and employment records which Newport Public Schools may deem necessary in its review of my application. I give the employer the right to investigate all references and secure additional information about me as necessary in arriving at an employment decision. I understand that this application is not and is not intended to be a contract of employment and hereby release from liability the employer and its representatives for seeking such information and all other persons, corporations, or organizations for furnishing such information. A photocopy of this release should be deemed the equivalent of an original for all purposes.

Should your candidacy go before the Newport School Committee, you are hereby notified that discussions pursuant to RIGL 42-46-5(a)(1) pertaining to your job performance, character or physical or mental health may take place in a meeting closed to the public pursuant to RIGL 42-46-4. You are hereby advised that you may require said discussion be held at an open meeting.

Per Rhode Island General Laws 16-2-18.1 & 16-2-18.2, if you receive an employment offer, you will be required to obtain a State and National Background Check.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Please return this application and all applicable information, including college transcripts, to:

Newport Public Schools  
Human Resources  
109 Old Fort Road  
Newport, RI 02840  
Tel: (401) 619-5368  
Fax: (401) 849-0170

*PROVIDING QUALITY EDUCATION THAT MAKES A DIFFERENCE IN EACH STUDENT'S LIFE*

Additional comments:

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