Joseph Adams
Director of Finance & Operations



Donna Goodell, Program Director Pre-school, Elementary & Middle Schools

James Kelly, Program Director High Schools

LABBB Employment Application

Desired Position: Program(s):										
Elementary Schools		Middle Schools			High School			Non-Instructional		
☐ Butler (Belmont)		☐ Chenery (Belmont)			Arlington High			Executive Director's Office		
☐ Wellington (Belmont)		☐ Ottoson (Arlington)			Bedford High			Finance/HR Office		
☐ Fox Hill (Burling	ton)	☐ John Glenn (Bedford)			Belmont High			Information Tech. Office		
☐ Francis Wyman	(Burlington)				Burlington High			Recreation Office		
☐ Memorial (Burlington)					Lexington High			Transportation Office		
						an				
Applicant Demogr Applicant's Full Na Full Mailing Addres Telephone Numbe	me:									
Date of Birth: Educational & Pro			tion:	_	Social S	ecurity	#: <u> </u>			
Education Level	School Name		Dates Attende		Grad Year	Degree		Concentration		
High School										
Undergraduate										
Graduate										
Do you have a DESI	E License?	l	f yes, what's yo	our li	cense num	ber?				
Do you have anoth	er Mass. pro	ofessional licen	se related to y	our	desired po	sition?				
If yes, who is the is	suing body?		V	Vhat	's your lice	nse nur	nbe	r?		

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elevant Work E	xperience:				,	, ~ · · · · · ·		
Years Worked	Name	of Organization	f Organization Loca		Pos	ition	Full-Time or Part-Time?	
rofessional Ref	erences:						l	
Name		Relation		Telephone Number		Email Address		

Notice to Applicants

Applicant's Signature

It is the policy of LABBB Collaborative not to discriminate on the basis of race, sex, color, religion, sexual orientation, national origin, age, handicap, or any other protected class with respect to its hiring practices. With respect to Relevant Work Experience, an applicant may include verifiable work performed on a volunteer basis. No verbal promises regarding employment are binding on the part of the employer.

By signing below, I certify I've read the above notice and all information provided on this employment application is true
and complete to the best of my knowledge. I authorize LABBB Collaborative to review my character and skills for the
$position\ to\ which\ l'm\ applying\ by\ reviewing\ my\ application,\ any\ supporting\ documents,\ and\ by\ contacting\ my\ references.$

Date Signed

Applications may be sent to Maria Walsh, HR Coordinator, at mwalsh@labbb.net or mailed to: LABBB Collaborative Attn: HR Office 123 Cambridge St Burlington, MA 01803.