

**SIMSBURY PUBLIC SCHOOLS
SIMSBURY, CONNECTICUT**

NUTRITION SERVICES DEPARTMENT APPLICATION

Name _____ Telephone _____

Address _____ Email Address: _____

DATE OF APPLICATION: _____

POSITION APPLYING FOR:

- _____ Cook Manager
- _____ Substitute
- _____ General Assistant

When can you accept a position? _____

WORK EXPERIENCE (starting with your present position):

Employment Dates	Name of Firm	Position	Responsibilities	Reason for Leaving

EDUCATION:

Name of Institution	Location	Degree Acquired

REFERENCES (Please include names of three persons that we may call upon):

Name	Position	Address	Phone

Notice of Non-Discrimination

The Board of Education will not make employment decisions (including decisions related to hiring, assignment, compensation, promotion, demotion, disciplinary action and termination) on the basis of race, color, religion, age, sex, marital status, sexual orientation, gender identity or expression, national origin, ancestry, disability, pregnancy or genetic information, except in the case of a bona fide occupational qualification.

I certify that all statements made on this application are true, complete, and correct to the best of my knowledge and are made in good faith. Any misstatement or omission of material facts on this application may be cause for immediate dismissal.

Signature

Date

Please return this completed application and requested documentation to:

**Beth LaPane, Director of Nutrition Services
Simsbury Public Schools
933 Hopmeadow Street
Simsbury, CT 06070
blapane@simsburyschools.net
(860) 651-3361
Fax (860) 651-4343**

Revised October 20, 2021