



Haverhill Public Schools

DATE: _____

NAME _____ **S.S.#** _____

ADDRESS _____ **ZIP CODE** _____ **TEL.#** _____

SIGNATURE _____

TO: SUBSTITUTE CAFETERIA

Upon a successful interview and completion of the hiring forms we will be happy to include your name on the substitute list for the **2020-2021** school year. The Haverhill Public Schools consistent with M.G.L. 151A, S. 28A, considers you to have reasonable assurance of employment in the **2020-2021** school year.

Substitute employment with our district follows the current School Committee approved calendar during the school year. A copy of the **2020-2021** school calendar is available on the Haverhill Public Schools website. Once the **2020-2021** school year has ended, you will be sent a reasonable assurance letter to the address on file verifying your continuance of substituting for Haverhill Public Schools as a substitute cafeteria worker.

If it is your intent to accept this offer of reasonable assurance of employment as a substitute, you must **return this form within ten (10) business days of the date written above**, to the:

Haverhill Public Schools c/o Human Resource Department, 4 Summer Street, Room 104, Haverhill, MA 01830.

WHEN ARE YOU AVAILABLE: (Please Circle) M T W TH F or ALL

LEVEL PREFERENCE: (Please Circle) Elementary Middle High School or All

IF YOUR STATUS AS A SUBSTITUTE CHANGES DURING THE YEAR, PLEASE CALL THE HUMAN RESOUC E DEPARTMENT (978) 374-3411. IF YOU HAVE MADE A COMMITMENT TO ACCEPT A POSITION AS A SUBSTITUTE ON ANY GIVEN DAY, IT IS YOUR RESPONSIBILITY TO RECORD THE DATE, TIME, AND SCHOOL ASSIGNMENT, AS WELL AS THE EMPLOYEE YOU ARE COVERING FOR. IF YOU CANNOT BE THERE FOR ANY REASON, PLEASE CALL THE CAFETERIA SUPERVISOR OR SECRETARY.

TO ALL NEW APPLICANTS: All materials in the packet must be filled out and returned to the HPS Human Resource Department before an informal interview can be set up.