



**Town of North Attleborough
Human Resources Department
North Attleborough Public Schools & Town Government
Woodcock Administration Building, 6 Morse Street, North Attleborough, MA 02760**

Phone: (508) 643-2175

Fax: (508) 643-2144

SUBSTITUTE/TUTOR APPLICATION AUTHORIZATION FORM

All applicants interested in substituting with the North Attleborough Public Schools must complete the information below.

NOTE: Once you complete the form please contact the appropriate individual below to schedule an interview. Please bring this form along with a resume or a completed application to the interview. (Applications may be obtained in the Human Resources Department or on-line at naschools.net)

- ❖ Teachers/Instructional Assistants/Administrative Assistants – Human Resources (508) 643-2175 x 402
- ❖ Custodians – Emily Chagnon, Administrative Assistant II (508) 643-2100
- ❖ Nurses – Melissa Langille-Badger, Nurse Leader (508) 643-2140 x 223
- ❖ Cafeteria – Heather Baril, Director of Food Service (508) 643-2104
- ❖ Bus Monitors/Drivers – Michelle Hulme, Transportation Director/Student Services (508) 643-2160 x 304
- ❖ Tutors – Karen Hurley – Student Services Administrative Assistant (508) 643-2160 x 305

Name: _____

Address: _____

Phone: Home _____ Cell _____

Please CHECK the classification(s) and level(s) in which you are applying to substitute:

Classifications	Levels
<input type="checkbox"/> Teacher <input type="checkbox"/> Instructional Assistant – SPED <input type="checkbox"/> Instructional Assistant <input type="checkbox"/> Administrative Assistant <hr style="border-top: 1px dashed black;"/> <input type="checkbox"/> Nurse <input type="checkbox"/> Custodian <input type="checkbox"/> Cafeteria <input type="checkbox"/> Bus Monitor <input type="checkbox"/> Tutor <input type="checkbox"/> Bus Driver	<input type="checkbox"/> High School <input type="checkbox"/> Middle School <input type="checkbox"/> Elementary <input type="checkbox"/> Early Learning Center <hr style="border-top: 1px dashed black;"/> <input type="checkbox"/> Certified Teacher <input type="checkbox"/> Non-Certified Teacher

Please CHECK the day(s) in which you are available to substitute:

MONDAY TUESDAY WEDNESDAY THURSDAY FRIDAY

TO BE COMPLETED BY CENTRAL OFFICE

Approved to be utilized as a substitute: _____ Date: _____

Comments: _____

Sub-Coordinator/Substitute Contacts/Payroll Notified by Human Resources: _____

Document Checklist: *Application *I-9 Identification *CORI *Audit Form *W-4 *OBRA *Fingerprinting Receipt