



WELCOME TO THE MEAD SCHOOL!

Please note: Before you can be employed by The Mead School a background check must occur.

Please complete the following information and return to Martha Orosz, Director of Finance.

Name \_\_\_\_\_  
*FIRST*                      *MIDDLE*                      *LAST*                      Date of Birth \_\_\_\_\_

Current Address

Street \_\_\_\_\_

Apt/Suite# \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Previous Address (if less than 7 years)

Street \_\_\_\_\_

Apt/Suite # \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Email \_\_\_\_\_ Telephone \_\_\_\_\_

Social Security # \_\_\_\_\_

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