



**MASHGIACH EMPLOYMENT APPLICATION**

Thank you for your interest in working as a Mashgiach for the Rabbinical Council of New England. In order to consider you for employment, this application must be filled out in full. In addition to the application, a W4 form and I-9 form must be completed. In the event you wish to be employed as a private contractor (1099), please attach a W-9 form. These additional forms are available online at [www.irs.gov](http://www.irs.gov)

In addition a copy of one of the following must be submitted as proof of eligibility of employment.

- A) Copy of US Passport**  
OR
- B) Copy of Permanent Resident Card or Alien Registration Receipt Card**  
OR
- C) Copy of US Driver's License and copy of Social Security Card**  
OR
- D) Copy of US Driver's License and copy of Birth Certificate**

Please Fax, Email or mail all documents to:

Rabbinical Council of New England  
ATT: HR Department  
177 Tremont St. Boston, MA 02111  
Tel: (617) 426-2139  
Fax: (617) 426-6268



### MASHGIACH EMPLOYMENT APPLICATION

DATE OF APPLICATION: \_\_\_\_\_

#### Employment Information:

#### PERSONAL INFORMATION:

Hebrew Name: \_\_\_\_\_

English Name: \_\_\_\_\_

Full Legal Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

Home: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Cell: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Email: \_\_\_\_\_

Jewish DOB: \_\_\_\_\_ Legal DOB: \_\_\_\_\_

Personal Status: Single:  Married:

Synagogue Affiliation: \_\_\_\_\_

Personal/Family Rabbi: \_\_\_\_\_

Torah Education/Training: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

General Education/Training: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Additional Notes: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

For office use only

Interviewed by: \_\_\_\_\_ Date: \_\_\_\_\_

Comments: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Prior Kashrus Experience:

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

General Work Experience:

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

Applying for: Full:  Half:  Part:  Fill in:

Preferred days & hours available for work: \_\_\_\_\_

\_\_\_\_\_

Do you have use of a car? Yes  No

Please include 2 references from rabbis:

1. \_\_\_\_\_

\_\_\_\_\_

2. \_\_\_\_\_

\_\_\_\_\_

Signature: \_\_\_\_\_