

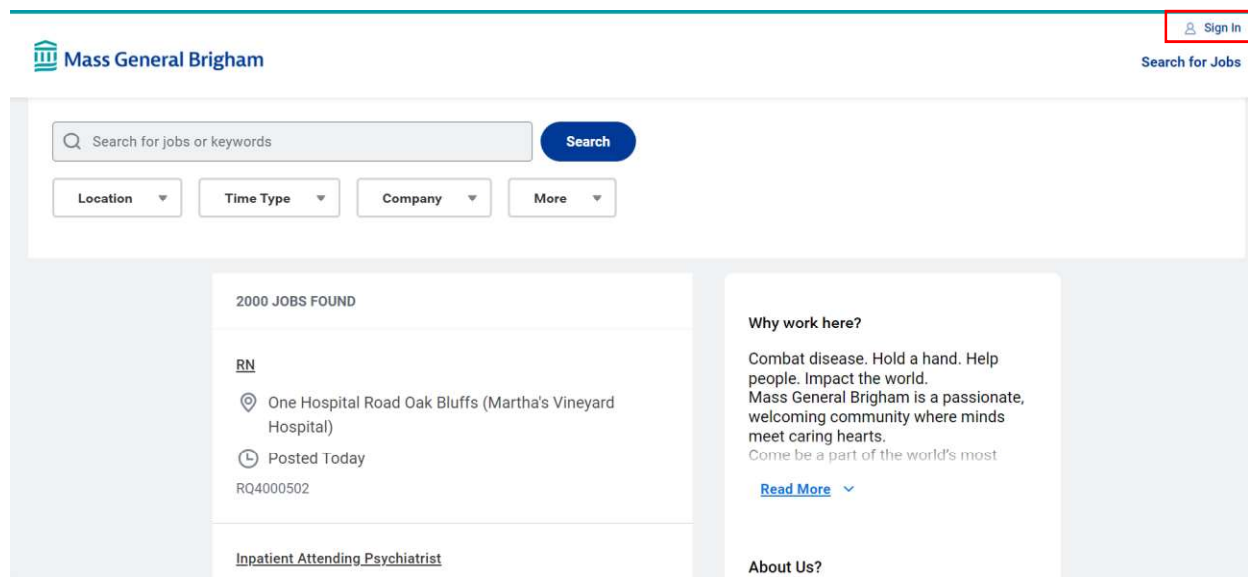
How to Navigate Mass General Brigham's Career Page

The following informs a potential applicant on how to navigate the Mass General Brigham careers page by looking at the homepage, filtering jobs, locating a job, applying to a job, submitting an application, and reviewing the status of an application.

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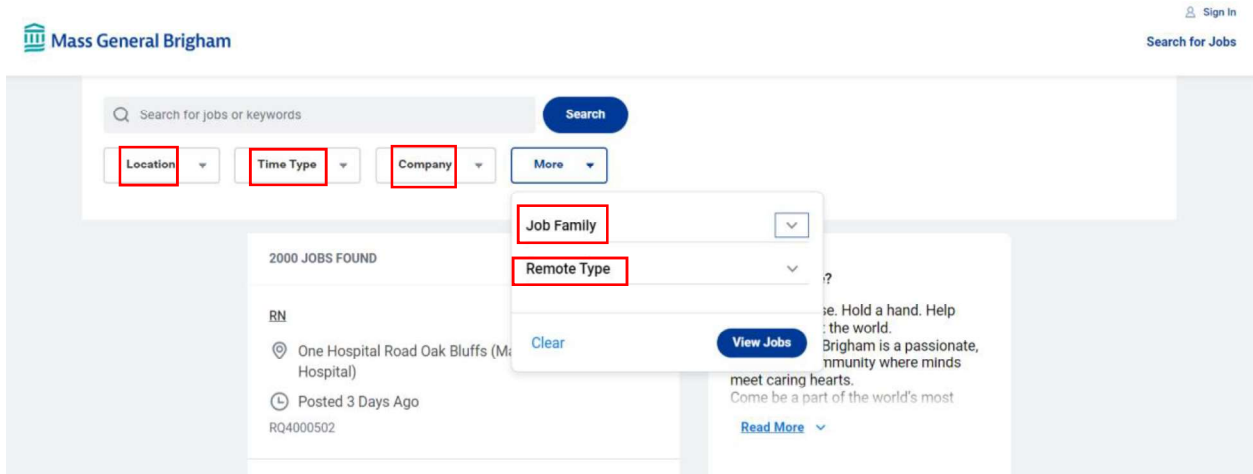
Homepage:

The Mass General Brigham career homepage is a landing page for applicants to search or filter open positions. In the top right corner, the 'Sign In' item allows for applicants to sign into an existing account or create a new one.



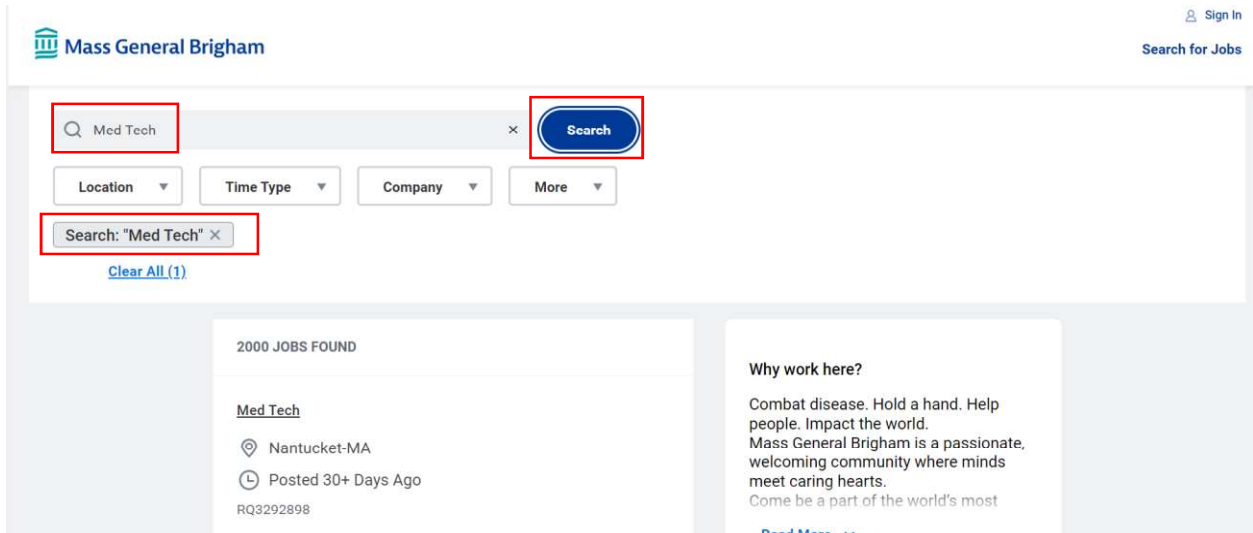
Filtering the Homepage:

The homepage allows applicants to filter jobs by location, time type, company, job family, or remote type.



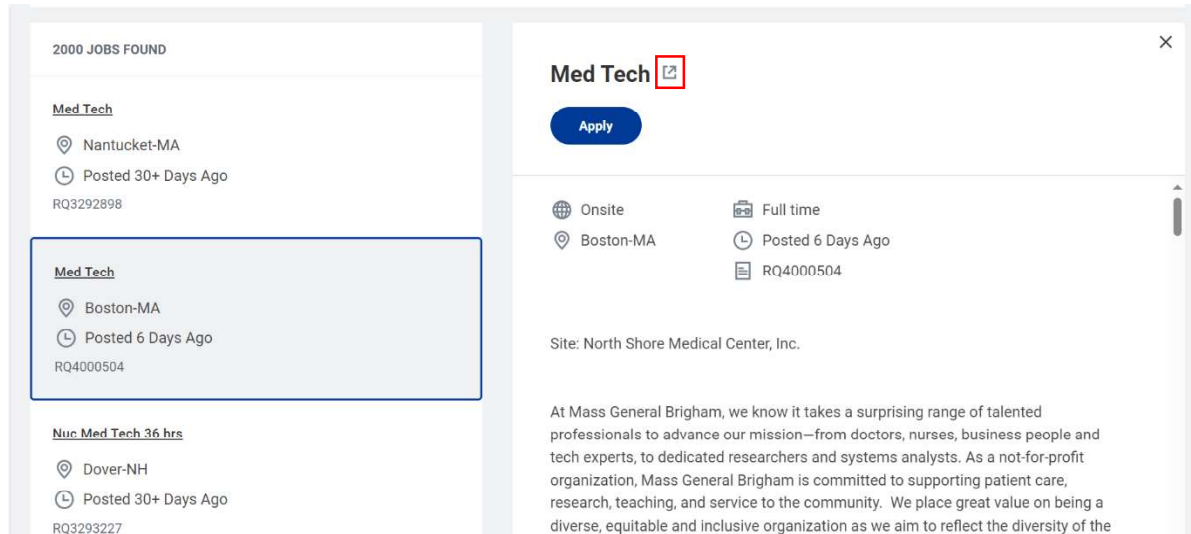
Utilizing the Search Bar:

If the applicant is aware of the job they are searching for, they can type it in the search bar.



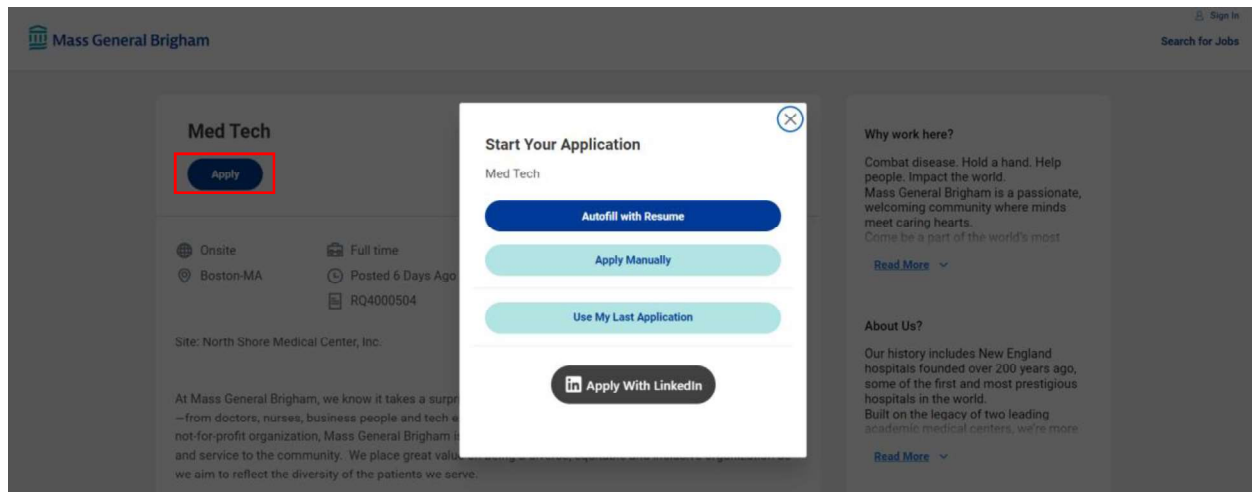
Locating a Job:

After clicking on a job posting to view or apply for, a summary page will populate on the right side of a split screen. To view the job posting in larger detail, click the expand item.



Application:

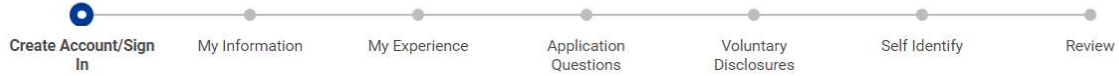
After click the 'Apply' item on the job posting, a pop-up will give the applicant an option to autofill with resume, apply manually, use last application, or apply with LinkedIn. For this example, we will apply manually.



After selecting 'Apply Manually', it will ask the applicant to sign in or create an account. To create an account, input an email address and create a password. Click the create account item.

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Create Account

Password Requirements:

- A minimum of 8 characters
- A numeric character
- A lowercase character
- An uppercase character
- An alphabetic character
- A special character

Email Address

OlafSnowman@noemail.com

Password

.....

Verify New Password

.....

Create Account

In the top right corner, the applicant's email address will appear. The application will show specific tabs, based on the job selected, that the applicant must complete. The 'My Information' tab asks for how the applicant heard about MGB, their country, their legal name (first, last, and a preferred name), their home address, their email address (which will populate), and their phone number (home or mobile).

j.doe@noemail.com

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My Information My Experience Application Questions Voluntary Disclosures Self Identify Review

My Information

* Indicates a required field

How Did You Hear About Us? *

Country *

United States of America

Legal Name

First Name *

Middle Name

Last Name *

I have a preferred name

Address

Address Line 1

Address Line 2

City

State

Select One

Postal Code

County

Email Address

janedoe@noemail.com

Phone

Phone Device Type *

Select One

Country Phone Code *

United States of America (+1)

Phone Number *

Phone Extension

[Save and Continue](#)

The 'My Experience' tab asks the applicant to include any work experience, education, certifications, languages, and other skills. The applicant should also attach a resume or cover letter, and has the option to add a relevant website.

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My Experience

* indicates a required field

Work Experience

Add

Education

Add

Certifications

Add

Languages

Add

Skills

Type to Add Skills

Resume/CV

Upload a file (5MB max)

Drop files here
or [Select files](#)

Websites

Add any relevant websites.

Add

The 'Application Questions' tab asks the applicant a series of questions.

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Application Questions

* Indicates a required field

Are you 18 years or older?*

Are you legally authorized to work in the United States? Verification will be required upon hire.*

Do you currently reside or have future plans to reside in either North Dakota, Wyoming, Puerto Rico, or the US Virgin Islands during your employment with Mass General Brigham?*

If you are currently working or have worked at one of the Mass General Brigham affiliates listed below, please select 'Yes'.

- Mass General Brigham Health Plan
- Brigham & Women's Faulkner Hospital
- Brigham & Women's Hospital, Brigham and Women's Physicians Organization
- Bulfinch Temporary Services
- Cooley Dickinson Hospital
- Cooley Dickinson Medical Group
- Cooley Dickinson VNA & Hospice
- Martha's Vineyard Hospital, Windemere Inc.
- Mass General Brigham
- Mass General Brigham Medical Group
- Mass General Brigham Healthcare at Home
- Massachusetts Eye and Ear
- Massachusetts General Hospital, Massachusetts General Physicians Organization
- McLean Hospital
- MGH Institute of Health Professions
- Nantucket Cottage Hospital
- Newton-Wellesley Hospital
- Mass General Brigham Community Physicians (formerly PCHI)
- Salem Hospital, North Shore Physicians Group
- Spaulding Hospital Boston & Cambridge, Spaulding Hospital Cape Cod, Spaulding Hospital North Shore, Spaulding Nursing & Therapy Centers
- Wentworth-Douglass Hospital
- Wentworth-Douglass Physicians Organization*

Will you now or in the future require sponsorship for employment visa status? (e.g. H-1B Visa Status or OPT)*

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Save and Continue

The 'Voluntary Disclosures' tab asks the applicant a series of questions. Read through the terms and conditions before checking off the box and proceeding with the rest of the application.

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Voluntary Disclosures

* Indicates a required field

Diversity

*Indicates a required field
Please provide the information requested in the fields below regarding diversity.
Please select your gender *

Select One

Please select your race/ethnicity *

Select One

Are you Hispanic or Latino?

Select One

Choose your Veterans Status *

Select One

Terms and Conditions

Please read the following statement carefully, then acknowledge that you have read and approved it by providing the information requested at the bottom of the page. Please note that an e-signature is the electronic equivalent of a hand-written signature.

The information supplied on this application and/or attached resume is true and complete to the best of my knowledge. I understand and agree that any false information or material omissions of fact may disqualify me from further consideration for employment or may be considered justification for dismissal if I am hired.

I understand that any offer of employment is contingent upon my ability to comply with United States Citizenship and Immigration Services requirements concerning my identity and right to work in the United States, satisfactory Massachusetts and multi-state criminal background checks, and satisfactory responses from my educational and/or employment references. I understand and hereby consent to a pre-employment health screening (if applicable), compliance with the Influenza Vaccination Policy, compliance with the COVID-19 Vaccination Policy and drug screening (if applicable). Please note, if a valid prescription for medication can be presented, do not be deterred from applying for a position since the drug testing program is designed to identify unlawful drug use only, and not the use of lawful drugs with a valid prescription. As a healthcare system, we expressly support the clinical treatment of those with substance use disorders and fully respect their need for medical privacy. I understand that any offer of employment is contingent upon satisfactory results of those screenings.

For those applying for positions at our New Hampshire locations, the following two terms also are included as Terms and Conditions of the employment application. As a healthcare facility, I understand that Wentworth-Douglass Hospital (WDH) and Mass General Brigham Medical Group comply with NH RSA 151:16-c in the disclosure of employment information upon request of a prospective or current employer. I authorize the release of information related to my performance upon request and agree to release from liability those requesting and providing employment information as it complies with the RSA and is done in good faith. I represent that I am not currently excluded, debarred, suspended, or otherwise ineligible to participate in Federal health care, procurement or non-procurement programs and that I have not been convicted of a criminal offense that may result in such ineligibility. I agree to immediately notify WDH or MGB if I receive notice that I am ineligible to participate in Federal health care programs or other Federal Programs.

I hereby authorize release to Mass General Brigham or any of its affiliates any or all reference information with respect to my academic and/or employment records including final evaluations and recommendations for future employment.

I understand that it is unlawful in Massachusetts to require or administer a lie detector test as a condition of employment or continued employment. An employer who violates this law shall be subject to criminal penalties and civil liability.

In the event that I am employed by Mass General Brigham or any of its affiliates, I agree to comply with all applicable rules, regulations, directives, policies and procedures. I understand that unless otherwise specified, employment is "at will" and may be terminated by me or the affiliate at any time.

I certify that I have read, fully understand and accept all terms of the foregoing statement. *

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Save and Continue

The 'Self Identify' tab asks the applicant to provide their primary language, full name, and date. This tab also asks to disclose any disabilities.

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Self Identify

* Indicates a required field

Language*

Voluntary Self-Identification of Disability

Form

CC-305

OMB Control Number

1250-0005

Expires

04/30/2026

Name*

Employee ID (if applicable)

Date*

Why are you being asked to complete this form?

We are a federal contractor or subcontractor. The law requires us to provide equal employment opportunity to qualified people with disabilities. We have a goal of having at least 7% of our workers as people with disabilities. The law says we must measure our progress towards this goal. To do this, we must ask applicants and employees if they have a disability or have ever had one. People can become disabled, so we need to ask this question at least every five years.

Completing this form is voluntary, and we hope that you will choose to do so. Your answer is confidential. No one who makes hiring decisions will see it. Your decision to complete the form and your answer will not harm you in any way. If you want to learn more about the law or this form, visit the U.S. Department of Labor's Office of Federal Contract Compliance Programs (OFCCP) website at www.dol.gov/ofccp.

How do you know if you have a disability?

A disability is a condition that substantially limits one or more of your "major life activities." If you have or have ever had such a condition, you are a person with a disability. **Disabilities include, but are not limited to:**

- Alcohol or other substance use disorder (not currently using drugs illegally)
- Autoimmune disorder, for example, lupus, fibromyalgia, rheumatoid arthritis, HIV/AIDS
- Blind or low vision
- Cancer (past or present)
- Cardiovascular or heart disease
- Celiac disease
- Cerebral palsy
- Deaf or serious difficulty hearing
- Diabetes
- Disfigurement, for example, disfigurement caused by burns, wounds, accidents, or congenital disorders
- Epilepsy or other seizure disorder
- Gastrointestinal disorders, for example, Crohn's Disease, irritable bowel syndrome
- Intellectual or developmental disability
- Mental health conditions, for example, depression, bipolar disorder, anxiety disorder, schizophrenia, PTSD
- Missing limbs or partially missing limbs
- Mobility impairment, benefiting from the use of a wheelchair, scooter, walker, leg brace(s) and/or other supports
- Nervous system condition, for example, migraine headaches, Parkinson's disease, multiple sclerosis (MS)
- Neurodivergence, for example, attention-deficit/hyperactivity disorder (ADHD), autism spectrum disorder, dyslexia, dyspraxia, other learning disabilities
- Partial or complete paralysis (any cause)
- Pulmonary or respiratory conditions, for example, tuberculosis, asthma, emphysema
- Short stature (dwarfism)
- Traumatic brain injury

Please check one of the boxes below:*

- Yes, I have a disability, or have had one in the past
- No, I do not have a disability and have not had one in the past
- I do not want to answer

PUBLIC BURDEN STATEMENT: According to the Paperwork Reduction Act of 1995 no persons are required to respond to a collection of information unless such collection displays a valid OMB control number. This survey should take about 5 minutes to complete.

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[Save and Continue](#)

The 'Review' tab allows the applicant to look over their application in full and make any necessary edits before submitting.

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My Information My Experience Application Questions Voluntary Disclosures Self Identify Review

Review

My Information

How Did You Hear About Us?
Linkedin

Legal Name
Olaf Snowman

I have a preferred name
No

Address
0 Arendelle Castle
Orlando, FL 32830
United States of America

Email Address
OlafSnowman@noemail.com

Phone
+1 (978) 9992424 (Mobile)

My Experience

Work Experience

[Back](#) [Submit](#)

Application Submission:

After reviewing the application and clicking 'Submit', a pop-up will confirm that the application has been submitted.

The screenshot shows the Mass General Brigham website interface. At the top, the logo and name 'Mass General Brigham' are visible on the left, and navigation links 'Search for Jobs', 'Candidate Home', and 'Job Alerts' are on the right. The user is logged in as 'Olaf Snowman' with the email 'OlafSnowman@noemail.com'. A 'Welcome, Olaf Snowman' message is displayed. Below this, there is a 'My Tasks' section. A white pop-up window is centered on the screen, titled 'Application Submitted' with a green checkmark icon. The pop-up contains the following text: 'Thank you for your job application.', 'If your profile meets the requirements, a member of our team will contact you.', 'We invite you to further explore the job openings available by clicking on the job search tab', and 'You have no more tasks.' At the bottom of the pop-up is a 'Return to Home' link. Below the pop-up, the text 'You have no tasks.' is visible on the page.

Application Status:

To check the status of an application, the applicant will log in to the MGB career's page and scroll down the homepage to reach 'My Applications'. The applicant has access to view the application status, along with clicking the three dots under 'Action' to view the application or withdraw the application.

You have no tasks.

My Applications

As we are evaluating your qualifications, we may contact you to provide additional information. In this case you will receive a notification with instructions. Thank you for your interest in joining our team !!

[Active \(1\)](#) [Inactive \(0\)](#)

Job Title	Job Req	My Application Status	Date Submitted	Action
Med Tech	RQ4000504	Application Under R...	December 9, 2024	...

[View Application](#)
[Withdraw Application](#)

Similar Jobs