

MAINE SCHOOL ADMINISTRATIVE DISTRICT NO. 56

Frankfort, Searsport, Stockton Springs
6 Mortland Road
Searsport, ME 04974
(207) 548-6643

SUBSTITUTE APPLICATION

MSAD #56 DOES NOT DISCRIMINATE IN THE OPERATION OF ITS EDUCATIONAL AND EMPLOYMENT POLICIES AND WILL HONOR ALL APPROPRIATE LAWS RELATIVE TO DISCRIMINATION.

Name _____
Address _____

Date _____
Social Security # _____
Telephone: _____

I am willing to substitute as a: _____ Teacher _____ Ed Tech _____ Secretary
 _____ Bus Driver _____ Custodian _____ Maintenance Worker
 _____ Food Service worker

I am willing to substitute in: _____ Frankfort _____ Searsport _____ Stockton Springs

EDUCATION: It is essential that this section be completed accurately.

<u>High School/College/University Attended</u>	<u>Degree Awarded (if any)</u>	<u>No. of Yrs. Attended</u>	<u>Grade Point Average</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

CERTIFICATION: List certification(s) you hold and provide copies of certification.

<u>Type</u>	<u>State</u>	<u>Date Issued</u>	<u>Date expiration</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

FINGERPRINTING: Please provide a copy of your CHRC (Criminal History Record Check) approval form.

EXPERIENCE: Please attach a copy of your resume.

AREAS OF INTEREST: Complete this section ONLY if interested in substitute teaching.

- Please indicate grade level(s) at which you are interested in substitute teaching:
K-2 ___ 3-5 ___ 6-8 ___ 9-12 ___ Special Education _____
- If you are interested in substituting at the elementary level and have a specialty area, please circle the area(s):
Art Music Physical Education Other
- If you are interested in substituting at the middle school or high school level, please indicate specific subject areas:

REFERENCES: Please provide three references who are not related to you who are familiar with your work as a teacher, substitute or who know of your experience working with youth.

<u>Name</u>	<u>Address</u>	<u>Telephone</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____

BACKGROUND:

Have you ever been disciplined, discharged, or asked to resign from a prior position? Yes ___ No ___

Have you ever resigned from a prior position after a complaint had been received against you or your conduct was under investigation or review? Yes ___ No ___

Has your contract in a prior position ever been non-renewed? Yes ___ No ___

Have you ever not been nominated for re-employment in a prior position or ever had your nomination for re-employment not be approved? Yes ___ No ___

Have you ever been charged with or investigated for sexual abuse or harassment of another person? Yes ___ No ___

Have you ever been convicted of a crime (other than a minor traffic offense)? Yes ___ No ___

Have you ever entered a plea of guilty or "no contest" (nolo contendere) to any crime (other than a minor traffic offense)? Yes ___ No ___

Have you ever had a professional license or certificate suspended or revoked in any state, or have you ever voluntarily surrendered, temporarily or permanently, a professional license or certificate in any state? Yes ___ No ___

Has any court ever deferred, filed or dismissed proceedings without a finding of guilty and required that you pay a fine, penalty or court costs and/or imposed a requirement as to your behavior or conduct for a period of time in connection with any crime (other than a minor traffic offense)? Yes ___ No ___

If you have answered YES to any of the previous questions, provide full details below including, with respect to court actions, the date, offense in question, and the address of the court involved. Attach additional sheets is necessary. Conviction or other disposition of a crime is not necessarily an automatic bar to employment.

My signature below constitutes authorization to check my employment history, including without limitation, criminal arrest and conviction record checks, reference checks, and release of investigatory information possessed by any state, local or federal agency. I further authorize those persons, agencies or entities that MSAD #56 contacts in connection with my employment application to fully provide MSAD #56 any information on the matters set forth above. I expressly waive in connection with any request for or provision of such information, any claims, including without limitation, defamation, emotional distress, invasion of privacy, or interference with contractual relations that I might otherwise have against MSAD #56, its agents and officials or against any provider of such information.

I understand that information submitted in and with this application may be disclosed to a screening and/or interviewing committee, which may include board members, administrators, other staff, and members of the community. I give my consent to this disclosure.

Signature/Date

APPLICATION FOR SUBSTITUTES CHECK LIST: The completed employment application can not be evaluated unless all of the following materials have been provided.

- _____ Application form fully completed and signed
- _____ Copy of Maine Certification(s)
- _____ Copy of Resume
- _____ YES to any of the questions in the Background section explained
- _____ CHRC approval form

Note: Employment cannot be finalized until the applicant has completed requirements for complete background checks and fingerprinting as required by Maine State Statute.

All application materials become the property of MSAD #56. None will be returned. Providing any false or misleading information on this application or in the application or employment screening process shall be fully sufficient grounds to refuse to employ the applicant or, if the applicant has been employed, to immediately dismiss the applicant/employee. Applications will be retained for a period of three years from date of receipt.