

Equal Opportunity Employer

MSAD 54

196 W. Front St., Skowhegan, Maine 04976 (207) 474-9508

Canaan
Cornville
Mercer

**Application for Employment
for the position of Substitute Teacher**

Norridgewock
Skowhegan
Smithfield

MSAD 54 does not discriminate in the operation of its educational and employment policies and will honor all appropriate laws relative to discrimination.

Date _____

Name _____

Social Security No. _____ - _____ - _____

Address _____

Email _____

Phone _____

EDUCATION: Transcripts, including grades, from all college(s)/university(s) attended must be provided. It is essential that this section be completed accurately. A copy of your high school diploma is required if you do not have a college degree.

College/University Attended	Degree Awarded (if any)	No. of yrs. attended	Grade Point Average
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_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

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

Type	State	Date Issued	Date of Expiration
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_____	_____	_____	_____
_____	_____	_____	_____

EXPERIENCE: Please list previous teaching/substituting experience. Please attach a copy of your résumé.

Grade/Subject	Position	Employer	Dates (from/to)
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_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

AREAS OF INTEREST:

- Please indicate grade level(s) at which you are interested in substituting.
K-1 _____ 2-4 _____ 5-6 _____ 7-8 _____ 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 _____ Home Tutoring _____ ASL _____
- If you are interested in substituting at the middle school (7-8) or high school (9-12) level, please indicate the 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.

Name	Address	Telephone
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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. Use additional sheets if necessary. Conviction or other disposition of a crime is not necessarily an automatic bar to employment.

Are you able to perform the tasks of the job for which you are applying, with or without accommodations? Yes ___ No ___

If an accommodation would be required to enable you to perform the job tasks, please describe that accommodation and how it would enable you to perform the job tasks.

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 54 contacts in connection with my employment application to fully provide MSAD 54 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 54, 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

Are you currently a member of the Maine State Retirement System? Yes _____ No _____

Are you currently retired from the Maine State Retirement System? Yes _____ No _____

APPLICATION FOR SUBSTITUTE TEACHING POSITION CHECK LIST: The completed employment application cannot be evaluated unless all of the following materials have been provided:

- _____ Application form fully completed
- _____ Copies of Transcript(s) or copy of your high school diploma if you do not have a college degree.
- _____ Copy of Maine Certification(s)
- _____ Copy of résumé
- _____ YES to any of the questions in the Background section explained
- _____ Copy of your social security card and driver's license (or other appropriate identification for completion of I9 form)
- _____ Application signed

NOTE: ALL APPLICATION MATERIALS BECOME THE PROPERTY OF RSU 54/MSAD 54. 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.

NOTE: Any substitute who has already been fingerprinted will receive a five-year approval card once the national and state records check is complete.

Interview Process

1. Date of interview: _____

2. Recommendations: _____

(circle one) List I, II, III, IV

Interviewer: _____
(signature)

BACKGROUND CHECK WAIVER

It is the policy of M.S.A.D. #54 to conduct criminal background checks on all potential employees/volunteers. Employment/volunteering in M.S.A.D. #54 is contingent on the results of such checks. In order to conduct the check, a birth date is required. Please provide us with your birthdate, current address, sign the waiver, and return it to us.

Full Name: _____ Birthdate: _____

Any Other Name Used (including maiden name): _____

Current Address: _____

I understand that the above information I have voluntarily provided will be used solely for the purpose of a background check. It will not be used for any other reason until such time as I become an M.S.A.D. #54 employee/volunteer.

Signature Date

