



Maine School Administrative District #40

Friendship • Union • Waldoboro • Warren • Washington
Educational Service Center
PO Box 701 Union, Maine 04862
Phone (207) 785-2277 Fax (207) 785-3119
Website: www.msad40.org

FOR OFFICE USE ONLY	
Last Name	_____
Date Received	____/____/____
Copy To	_____
SBI Sent Out	____/____/____
SBI Returned	____/____/____
Hire Date	____/____/____

SUPPORT STAFF APPLICATION

MSAD #40 and the Maine Department of Education **require ALL** employees to have their fingerprints taken through the Department of Education and background checked. You are able to make your appointment for fingerprinting through the Department of Education website at <http://www.informe.org/cgi-bin/doe/fingerprint.pl>.

MSAD #40 DOES NOT DISCRIMINATE IN THE OPERATION OF ITS EDUCATIONAL AND EMPLOYMENT POLICIES AND WILL HONOR ALL APPROPRIATE LAWS RELATIVE TO DISCRIMINATION.

Date _____ Position applying for: _____
 Name _____ (Bus Driver, Custodian, Secretary, Educational Technician, Cafeteria Worker, etc.)
 Email _____
 When will you be available? _____ (Position location) _____
 Permanent Address _____
 Phone _____

EDUCATION: Starting with high school, list any schools or colleges you may have attended.

School Attended	Address	No. Years Attended	Graduated/Degree
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

(If applying for Secretarial or Education Technician positions, please include college transcripts)

SPECIAL SKILLS:

Do you hold a valid drivers license? State: _____ Endorsement: _____

What office machines are you familiar with? _____

What other special skills do you have or licenses do you hold that may be relevant to this position? _____

EXPERIENCE: Please list all previous employment starting with the most recent job held. Use the back of the page if necessary. Please account for any gaps in employment during the past ten years on the back of page.

From To (month/year)	Position	Duties	Employer
_____ to _____	_____	_____	_____
_____ to _____	_____	_____	_____
_____ to _____	_____	_____	_____
_____ to _____	_____	_____	_____
_____ to _____	_____	_____	_____
_____ to _____	_____	_____	_____
_____ to _____	_____	_____	_____

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 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 ___

For BUS DRIVER applicants only: Have you ever been charged with a traffic offense or pleaded guilty or “no contest” (nolo contendere) to a 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.

REFERENCES: List three, two of whom are most recent supervisors, who can comment on your ability and whom we may contact.

Name	Position	Address	Phone
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

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 the MSAD #40 contacts in connection with my employment application to fully provide the MSAD #40 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 the MSAD #40 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 NON-TEACHING PERSONNEL CHECK LIST: The completed employment application cannot be evaluated unless all of the following materials have been provided:

- _____ Application form fully completed
- _____ Gaps in employment during the past ten years explained
- _____ YES to any of the questions in the Background section explained
- _____ Application signed
- _____ Transcripts, if applicable

NOTE: ALL APPLICATION MATERIALS BECOME THE PROPERTY OF MSAD #40. 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: EMPLOYMENT CANNOT BE FINALIZED UNTIL THE APPLICANT HAS COMPLETED REQUIREMENTS FOR COMPLETE BACKGROUND CHECKS AND FINGERPRINTING AS REQUIRED BY MAINE STATE STATUTE.