

CENTRAL LINCOLN COUNTY SCHOOL SYSTEM
MAINE AOS NO. 93
(Bremen, Bristol, Damariscotta, Jefferson, Newcastle, Nobleboro, South Bristol)
767 Main Street
Damariscotta, ME 04543
(207)563-3044

APPLICATION FOR SUBSTITUTE TEACHING POSITION

MAINE AOS NO. 93 DOES NOT DISCRIMINATE IN THE OPERATION OF ITS EDUCATIONAL AND EMPLOYMENT POLICIES AND WILL HONOR ALL APPROPRIATE LAWS RELATIVE TO DISCRIMINATION.

Date _____ Date Available _____ MSRS Member? _____
Name _____ Have you been fingerprinted? _____
Address _____
_____ Phone _____

EDUCATION: Transcripts, including grades, from all college(s)/university(s) attended must be provided. It is essential that this section be completed accurately.

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

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

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

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

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

AREAS OF INTEREST:

1. Please indicate grade levels(s) at which you are interested in substituting:

K-2_____ 3-5_____ 6-8_____ 9-12_____ Special Education_____

2. If you have a specialty area, please circle the area(s)

Art Music Physical Education Other_____

SIGNATURE:

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 school unit contacts in connection with my employment application to fully provide the school unit 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 school unit, 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 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)
- _____ Copy of Maine Certification(s)
- _____ Copy of resume
- _____ YES to any of the questions in the Background section explained
- _____ Application signed

NOTE: ALL APPLICATION MATERIALS BECOME THE PROPERTY OF THE SCHOOL UNIT. 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.