

RSU No. 5 DURHAM - FREEPORT - POWNAL
17 West Street
Freeport, ME 04032
(207) 865-0928
www.rsu5.org

APPLICATION FOR Freeport Performing Arts Technician

Name: _____ Date: _____

Address: _____

City/Town: _____ State: _____ Zip: _____ Phone: _____

Email Address: _____

Educator ID

Number(s): _____

***Note:** Required for anyone 18 years and older. This number can be found in your MEIS (Maine Educator Information System) account. To access your MEIS account or to create an account, please visit:

https://www.mymainecertification.com/SSO_PROD/Signin.aspx

EDUCATION: Name of School and Dates Attended

EXPERIENCE: Please list all previous employment, starting with the most recent. Please use additional pages if necessary.

Employer Position & Dates Employed

REFERENCES: List three, including most recent supervisors, if applicable, who can comment on your ability and whom we may contact.

Name & Phone

CERTIFICATION: In accordance with Maine Department of Education requirements, individuals age 18 or older who are employed by a school administrative unit are required to obtain a Maine Department of Education Criminal History Records Check (CHRC) based on fingerprints. Please provide a copy of any certifications.

Do you currently hold a valid CHRC, Ed Tech Certification or Teacher Certification from the Maine Department of Education? _____

Have you completed Fingerprinting through the Maine Department of Education? _____

Work Permit Requirement: Applicants under 16 years of age are required to obtain an approved Maine work permit before beginning employment, as required by Maine law. Employment may not begin until the required permit has been approved.

LEGAL INFORMATION: Applicants are not obligated to disclose sealed or expunged records. Have you ever resigned from a prior position after a complaint has been received against you or your conduct was under investigation?

Please explain if you have answered YES:

Have you ever been disciplined, discharged, or asked to resign from a prior position?

Please explain if you have answered YES:

Have you ever not been nominated for re-employment in a prior position or ever had a nomination for reemployment not been approved?

Please explain if you have answered YES:

Have you ever been investigated for sexual abuse or harassment of another person?

Please explain if you have answered YES:

Have you ever had a professional license, credential, or certificate suspended or revoked in any state, or have you ever voluntarily surrendered, temporarily or permanently, a professional license certificate in any state?

Please explain if you have answered YES:

WORK AUTHORIZATION/EEO:

Are you legally able to work in the U.S.? _____

Providing this information is strictly voluntary. You will not be subject to adverse action or treatment if you choose not to provide this information. If you chose not to provide this information, please state "Decline to Identify".

Gender: _____

American Indian or Alaskan Native: _____

Black or African American: _____

White: _____

Native Hawaiian or Other Pacific Islander: _____

NOTE:

- 1) All application materials become property of RSU5. None can be returned.
- 2) Employment cannot be finalized until the applicant has completed requirements for complete background checks and fingerprints (if applicable) as required by the Maine State Statute.
- 3) Prior criminal history, conviction, or other dispositions is not necessarily an automatic bar to employment – the circumstances of each situation will be carefully assessed.

*I have read and acknowledged NOTES 1), 2) and 3).

I, _____, agree to all the terms above.

X Signed: _____

The school district does not discriminate on the basis of race, color, sex, sexual orientation, religion, ancestry or national origin, disability, age, pregnancy, or generic information in admission or access to, or treatment or employment in its programs and activities. Any person having inquiries concerning the School's compliance with the regulation implementing Title VI of the Civil Rights Act of 1964 (Title VI), Section 504 of Rehabilitation Act of 1973 (Section 504), or Title II of the American with Disabilities Act of 1990 (ADA), may contact the Assistant Superintendent or Human Resources.

*I agree to the terms above:

*Initials: _____

*Affirmation Date: _____

I affirm that all the information set forth in this application is accurate, truthful, and complete. If I am employed by the School District, I will abide by all the Board of Education and school policies, work on assigned committees and continue my professional growth to the best of my ability and within reasonable and personal standards. I grant permission for school officials to obtain a personal record check from the federal, state, country, and/or local law enforcement agencies and Division of Family Services; also a credit history check may be made. I release individuals listed as references and current or former employers from any liability for information given in response to a request for an employment reference. I understand that I may be required to take a drug test and physical exam prior to assuming any position for which I may be employed. In the event that I am employed by the District and in the further event that I have provided false or misleading information in the application or in subsequent employment interview, I understand that my employment may be terminated at any time after discovery of the false or misleading information. I understand that this application will be considered active for one year from date of submission.

*I agree to the above terms:

*Initials: _____

*Affirmation Date: _____

Signature: _____ Date: _____