

ISLESBORO CENTRAL SCHOOL

159 Alumni Drive P.O.

Box 118

Islesboro, ME 04848

(207) 734-2251

General Application

Islesboro School Department is an Equal Opportunity Employer

PERSONAL DATA

Name: (First, Middle, Last)

Address:

City:

State:

Zip:

Date:

Home Phone:

Work Phone:

I may be contacted: at work ___ at home ___

If employed, can you offer proof of U. S. Citizenship? Yes ___ No ___

APPLICATION INSTRUCTIONS: A complete application includes the following:

1. A completed and signed application form. (Please complete all information in the application even though it may be duplicated on your resume.)
2. A current resume.
3. Letters of reference from a minimum of three (3) persons.
4. If applying for teaching, or other certified positions, include transcripts and copy of certifications.

Mail or email ALL INFORMATION TO:

Kate Legere

Principal

Islesboro Central School

P.O. Box 118

Islesboro, ME 04848

klegere@icspathways.org

PLEASE NOTE: On completion of the search, all application materials received will be on file for one year.

CURRENT EMPLOYMENT INFORMATION:

Are you presently working?

If yes, when would you be available to begin work at Islesboro Central School?

Name of present employer:

Position:

ACADEMIC AND PROFESSIONAL TRAINING:

EMPLOYMENT HISTORY: Please list beginning with your current or most recent experience.

Number of Dates

Years From/To Position Responsibilities / School System

OTHER RELEVANT WORK EXPERIENCE AND ACHIEVEMENTS:

CIVIC AND COMMUNITY INVOLVEMENT:

REFERENCES:

List at least three persons (not related to you) we may contact, two of whom are your most recent supervisors, who can comment on your abilities.

1. Name Phone Number

2. Name Phone Number

3. Name Phone Number

BACKGROUND:

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

Yes ___ No ___

2. Have you ever been charged with or investigated for sexual abuse or harassment of another person?

Yes ___ No ___

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

4. 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 ___

5. 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 if necessary. Conviction or other disposition of a crime is not necessarily an automatic bar to employment.

NOTE: Conviction of a crime is **not** an automatic bar to employment by the school department.

Any willful falsification of information or misleading information on this application shall be fully sufficient grounds to refuse to employ, or having been employed, shall be immediate cause for dismissal. 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 Islesboro School Department contacts in connection with my employment application to fully provide the Islesboro School Department 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 Islesboro School Department, 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 school committee members, administrators, other staff, and members of the community. I give my consent to this disclosure.

SIGNATURE DATE