

**SCHOOL ADMINISTRATION DISTRICT #4
25 CAMPUS DRIVE – DROP #2
GUILFORD, MAINE 04443**

APPLICATION FOR ADMINISTRATOR

The School Administrative District does not discriminate in the operation of its educational and employment policies and will honor all appropriate laws relative to discrimination.

Name _____ Date _____

Address _____ Phone _____

When will you be available? _____

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	Date Awarded
_____	_____	_____
_____	_____	_____
_____	_____	_____

UNDERGRADUATE G.P.A. _____ GRADUATE G.P.A. _____

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

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

If you hold a Maine certificate, for what type of Maine certificate are you applying and eligible? _____

Note: Candidates who do not hold Maine certification should direct an inquiry to the Maine Department of Education, Division of Certification and Placement, Augusta, Maine 04333.

EXPERIENCE: A resume must be provided. In addition to educational background and work experience, include extra-curricular activities in which you have been involved. Please list below positions held, employer, and dates of employment for the past ten years. Please account for any gaps in employment on a separate page.

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

Number of years of teaching experience _____. Number of years of administrative experience _____.

REFERENCES: List three, two of whom are most recent supervisors, who can comment on your ability and whom we may contact. In addition, please provide three letters of reference from persons who are not related to you (may be from references listed below).

<u>Name</u>	<u>Position</u>	<u>Address</u>	<u>Telephone</u>

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 on an additional sheet including, with respect to court actions, the date, offense in questions, and the address of the court involved. Conviction or other disposition of a crime is not necessarily an automatic bar to employment.

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 SAD #4 contacts in connection with my employment application to fully provide SAD #4 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 SAD#4 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 ADMINISTRATIVE 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)
- _____ Resume
- _____ Gaps in employment during the past ten years explained
- _____ YES to any of the questions in the Background section explained
- _____ Three letters of reference
- _____ Application signed

NOTE: ALL APPLICATION MATERIALS BECOME THE PROPERTY OF SAD #4. 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.