

MAINE SCHOOL ADMINISTRATIVE DISTRICT #49  
8 SCHOOL STREET  
FAIRFIELD, ME 04937  
ALBION \* BENTON \* CLINTON \* FAIRFIELD  
207 453-4200 FAX 207 453-0110

**Substitute Teacher Application**

**Personal Data**

**Date of Application** \_\_\_\_\_

Name \_\_\_\_\_ E-mail \_\_\_\_\_

Address \_\_\_\_\_

Telephone \_\_\_\_\_ Cell \_\_\_\_\_

Emergency Contact Information Name \_\_\_\_\_ Phone \_\_\_\_\_

**Educational Preparation**

High School \_\_\_\_\_ Graduated Yes or No

Vocational \_\_\_\_\_ Graduated Yes or No

College \_\_\_\_\_ Graduated Yes or No

Degree \_\_\_\_\_ Major/Minor \_\_\_\_\_

Certified Yes ( ) please attach a copy No ( )

**Teaching/Employment History**

Employer (Most Recent)

Dates

_____	_____
_____	_____
_____	_____

**References** (List three with e-mails, if possible)

Name	Position	Phone/e-mail
_____	_____	_____
_____	_____	_____
_____	_____	_____

Have you, an applicant for a position in MSAD#49 ever been charged with or investigated of sexual abuse of another person, or have you ever been charged with, pleaded guilty or “no contest” to; or been convicted of any crime including any crime of any person or other crime of moral turpitude?  Yes  No

If yes, provide details: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Have you ever been disciplined, discharged, or compelled to resign from a prior position?  
 Yes  No If yes, provide full details: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

I have received the MSAD#49 Substitute Teacher’s Handbook and agree to carry out the duties of a substitute as stated  Yes  No

Providing any false or misleading information in the application or employment screening process shall be fully sufficient grounds to refuse to employ, or having been employed, immediately to discharge the applicant. Failure to carry out any of your responsibilities as a substitute may jeopardize further employment as a substitute in MSAD#49. My signature below authorizes MDAD#49 officials to follow up on this application and also to check with listed references and other sources.

**Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

MSAD#49 does not discriminate in the operation of its educational and/or employment status. All applicable laws relative to non-discrimination are followed. MSAD#49 is an equal opportunity employer.

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Dear Applicant:

Thank you for your interest in substitute teaching in our district. Attached is an application for subbing along with a handbook full of helpful information.

Once you have completed the substitute teacher application, I need to send your e-mail address to my co-worker to send you the appropriate Safe Schools training. This training needs to be completed prior to you being interviewed. Once you complete this, please call me to let me know. I can then set you up for an interview.

**Information for Fingerprint Form—Extremely Important**

Maine State Law requires anyone working in a school district to have fingerprinting and a criminal history check **prior** to working in a school setting. The cost for fingerprinting is now \$70 for subs. **You need to complete the attached fingerprint form and mail it to the address listed on the form enclosing a \$15.00 fee.** If you are already set up for printing, please include the date and location on the form under “If yes, where and date”. If you do not include this \$15.00 fee with the form, they will send it back to you, or you won’t get your fingerprint approval. Once they get this form with the \$15.00 fee, they will give you temporary approval for two months. *Once you’ve sent in this form, you need to set yourself up for fingerprinting by going to [me.ibtfingerprint.com](http://me.ibtfingerprint.com).* You can set yourself up using a credit or debit card. This is a \$55.00 fee. Printing is done in numerous places in Maine, but Augusta is probably the closest one (and has daily appointments) except for Winslow Elementary School, which is one Saturday a month. The dates and times available can be found on the fingerprint site.

Again, thank you for your interest in subbing in our district. I look forward to working with you. If you have any questions at all, feel free to call me at 453-4200 extension 3150.

Sincerely,

Cricket Van Tuinen  
MSAD #49 Secretary & Substitute Coordinator

**MAINE DEPARTMENT OF EDUCATION  
APPLICATION FOR INITIAL EDUCATIONAL APPROVAL**

1. NAME (First, MI, Last, and optional suffix such as Jr., III)		2. Social Security Number		3. Other name(s) under which Your records are filed		DATE		
4. Mailing Address			5. EMAIL Address			6. City or Town	7. State	8. Zip Code
9. Home Phone	10. Sex ____ Male ____ Female	11. Date of Birth / / mo. day yr.		<b>RETURN TO:</b> DEPARTMENT OF EDUCATION CERTIFICATION OFFICE 23 STATE HOUSE STATION, AUGUSTA, ME 04333-0023				

**THE FOLLOWING QUESTIONS MUST BE ANSWERED AND THE BOX CHECKED:**

1. Have you ever had any professional certificate or license revoked or suspended or voluntarily surrendered it? YES \_\_\_\_\_ NO \_\_\_\_\_
2. Have you ever received a reprimand or other disciplinary action involving any professional certification or license? YES \_\_\_\_\_ NO \_\_\_\_\_
3. Have you ever been convicted of any misdemeanor or felony offense no matter the age? (this would include OUI's) YES \_\_\_\_\_ NO \_\_\_\_\_
4. Have you ever been substantiated by any states health and human services department for child abuse, either sexual or physical? YES \_\_\_\_\_ NO \_\_\_\_\_
5. Are you required to register as a sex offender in any state? YES \_\_\_\_\_ NO \_\_\_\_\_
6. Do you currently have any outstanding criminal charges or warrants of arrest pending against you in this state or another state or country? YES \_\_\_\_\_ NO \_\_\_\_\_
7. Have you ever been investigated by an employer for inappropriate conduct or left a position while an investigation was pending, or to stop an investigation from moving forward? YES \_\_\_\_\_ NO \_\_\_\_\_

If the answer is yes to any of the above, please attach a detailed explanation.

I understand that this application contains no misrepresentations or falsehoods. I understand that misrepresentations or falsehoods may be cause for denial or revocation of my educational credential. I understand that I must notify the Commissioner of the Maine Department of Education in writing within 30 days if in the future the answers to any of these questions change.

Have you had your fingerprints taken as required by the Criminal History Record Check? (See enclosed instructions.)

\_\_\_\_\_ YES      \_\_\_\_\_ NO

If yes, where \_\_\_\_\_ Date: \_\_\_\_\_

I authorize the Dept. of Education to charge the applicable fees for this application:

M/C \_\_\_\_\_ VISA \_\_\_\_\_ EXPIRATION DATE \_\_\_\_\_ CREDIT CARD NUMBER \_\_\_\_\_

I hereby declare or affirm under penalty in the law for unsworn falsification that this application, and any supporting documentation provided in support of this application, contains no willful misrepresentations or falsifications and that the information given by me is true, accurate, and complete to the best of my knowledge and belief, and so far as based on information and belief, I believe the information to be true. I understand that my answers may be verified and that I may be declared ineligible for certification and subject to civil or criminal penalties if there are any misrepresentations.

I attest that I will not be seeking reimbursement for the application or fingerprinting fees associated with my CHRC request from any other entities. I acknowledge that my name and address provided in this application will be shared with fiscal agents of the State of Maine for the purpose of refunding the application and fingerprinting fees.

**SIGNATURE OF APPLICANT** \_\_\_\_\_ **DATE** \_\_\_\_\_



## LISTS OF ACCEPTABLE DOCUMENTS

**All documents must be UNEXPIRED**

Employees may present one selection from List A  
or a combination of one selection from List B and one selection from List C.

LIST A Documents that Establish Both Identity and Employment Authorization	OR	LIST B Documents that Establish Identity	AND	LIST C Documents that Establish Employment Authorization
<ol style="list-style-type: none"> <li>1. U.S. Passport or U.S. Passport Card</li> <li>2. Permanent Resident Card or Alien Registration Receipt Card (Form I-551)</li> <li>3. Foreign passport that contains a temporary I-551 stamp or temporary I-551 printed notation on a machine-readable immigrant visa</li> <li>4. Employment Authorization Document that contains a photograph (Form I-766)</li> <li>5. For a nonimmigrant alien authorized to work for a specific employer because of his or her status:               <ol style="list-style-type: none"> <li>a. Foreign passport; and</li> <li>b. Form I-94 or Form I-94A that has the following:                   <ol style="list-style-type: none"> <li>(1) The same name as the passport; and</li> <li>(2) An endorsement of the alien's nonimmigrant status as long as that period of endorsement has not yet expired and the proposed employment is not in conflict with any restrictions or limitations identified on the form.</li> </ol> </li> </ol> </li> <li>6. Passport from the Federated States of Micronesia (FSM) or the Republic of the Marshall Islands (RMI) with Form I-94 or Form I-94A indicating nonimmigrant admission under the Compact of Free Association Between the United States and the FSM or RMI</li> </ol>		<ol style="list-style-type: none"> <li>1. Driver's license or ID card issued by a State or outlying possession of the United States provided it contains a photograph or information such as name, date of birth, gender, height, eye color, and address</li> <li>2. ID card issued by federal, state or local government agencies or entities, provided it contains a photograph or information such as name, date of birth, gender, height, eye color, and address</li> <li>3. School ID card with a photograph</li> <li>4. Voter's registration card</li> <li>5. U.S. Military card or draft record</li> <li>6. Military dependent's ID card</li> <li>7. U.S. Coast Guard Merchant Mariner Card</li> <li>8. Native American tribal document</li> <li>9. Driver's license issued by a Canadian government authority</li> <li style="text-align: center;"><b>For persons under age 18 who are unable to present a document listed above:</b></li> <li>10. School record or report card</li> <li>11. Clinic, doctor, or hospital record</li> <li>12. Day-care or nursery school record</li> </ol>		<ol style="list-style-type: none"> <li>1. A Social Security Account Number card, unless the card includes one of the following restrictions:               <ol style="list-style-type: none"> <li>(1) NOT VALID FOR EMPLOYMENT</li> <li>(2) VALID FOR WORK ONLY WITH INS AUTHORIZATION</li> <li>(3) VALID FOR WORK ONLY WITH DHS AUTHORIZATION</li> </ol> </li> <li>2. Certification of report of birth issued by the Department of State (Forms DS-1350, FS-545, FS-240)</li> <li>3. Original or certified copy of birth certificate issued by a State, county, municipal authority, or territory of the United States bearing an official seal</li> <li>4. Native American tribal document</li> <li>5. U.S. Citizen ID Card (Form I-197)</li> <li>6. Identification Card for Use of Resident Citizen in the United States (Form I-179)</li> <li>7. Employment authorization document issued by the Department of Homeland Security</li> </ol>

**Examples of many of these documents appear in the Handbook for Employers (M-274).**

**Refer to the instructions for more information about acceptable receipts.**