

146 State House Station Augusta, Maine 04333

Phone: (207) 624-6660 Fax: (207) 624-6623

APPLICATION FOR EMPLOYMENT

Programs, services and employment are available equally to everyone.

Please inform the Human Resources Department if you require reasonable accommodations for the application or interview.

	Iministrative Support posections, except #4 and #6		Case Manager,	Persons applying for the following positions: Case Manager, Therapist, Teacher, Educational Technician Please complete ALL sections.			
CDS site applying to:	☐ Aroostook ☐ Opportunities	☐ Reach ☐ Project PEDS	☐ First Step ☐ Downeast	☐ Two Rivers ☐ York	☐ Midcoast Regional☐ State Office		
All employees of Child I fingerprints. The DOE r location. All fees associ	Development Services ar requires a fee that is due iated with the CHRC are		C approval from the Mai and an additional fee u e.	ine Department of Education pon requesting for fingerprin es, please provide a copy of	ting at an approved		
SECTION 2. Position Applying for:							
Full Name:							
Previous Name(s):							
Mailing Address:							
Telephone Number(s): _							
When will you be availal	en will you be available? Social Se		Security #:	Desired	Desired Salary:		
Are any of your immedia	ate family members (inclu	uding in-laws) currently em	nployed by Child Develo	opment Services?	Yes □ No		
If yes, please explain: _							
Are you eligible to be law	wfully employed in this co	ountry?	No				
SECTION 3. Educ Persons applying for Ca attended.		or Teacher positions must	provide a copy of trans	scripts, including grades, from	n all colleges / universities		
School Attended		Address		Number of Years Attend	ded Degree Awarded		

List certification(s) you hold and provide	e copies of certification.				
Туре	State		Date Issued	Date of E	expiration
If you do not hold a Maine certification,	for what type of Maine certif	icate are you applyi	ng and eligible?		
SECTION 5. Special Skills What computer programs and office ma	achines are you familiar with	?			
What other special skills and training do	o you have or licenses do yo	u hold that may be	relevant to this position?		
SECTION 6. Transportation This position requires traveling to a var	iety of locations to deliver se	rvices. Do you hav	e reliable transportation?	☐ Yes	□ No
SECTION 7. Experience List all previous employment starting w additional page if necessary. Persons applying for Case Manager, Ti background and work experience, inclu	herapist, Teacher or Educati	onal Technician pos	sitions, must provide a resume		
From (month / year) To (month / year)	Position	Empl	oyer		
SECTION 8. References List three, two of whom are most recen Persons applying for Case Manager, Tare not related to you (may be from reference)	herapist, Teacher or Educati		,	ers of reference	e from persons who
Name	Position	Address			Telephone
SECTION 9. Background					

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

SECTION 4. Certification

☐ No

☐ Yes

Have you ever resigned from a prior position after a complaint had been receive 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 been charged with or investigated for sexual abuse or harassme	nt 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 of (other than a minor traffic offense)?	crime	☐ Yes	□ No
Have you ever had a professional license or certificate suspended or revoked in ever voluntarily surrendered, temporarily or permanently, a professional license		☐ Yes	□ No
Has any court ever deferred, filed or dismissed proceedings without a finding of you pay a fine, penalty or court costs and/or imposed a requirement as to your begind 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 question, and the address of the court involved. Use additional sheets if necess automatic bar to employment.			
SECTION 10. Signature My signature below constitutes authorization to check my employment history, is reference checks, and release of investigatory information possessed by any state or entities that Child Development Services contacts in connection with my empinformation on the matters set forth above. I expressly waive in connection with without limitation, defamation, emotional distress, invasion of privacy, or interfer Development Services, its agents and officials or against any provider of such in	ate, local or federal agency loyment application to fully any request for or provisio ence with contractual relati formation. osed to a screening and/or	I further authorize provide Child Deve n of such informations that I might oth interviewing comm	those persons, agencies dopment Services any on, any claims, including erwise have against Child
board members, administrators, other staff, and members of the community. I g	live my consent to this disc	losure.	
Applicant Signature		Dat	e
SECTION 11. Checklist The completed employment application cannot be evaluated unless all of the following the completed employment form, fully completed Gaps in employment during the past ten years "Yes" to any of the questions in the Background section Criminal History Records Check Approval Card Application signed	Iowing materials have been Additionally, for Case Ma Teacher, Educational Tea Copy of Transcript(s) Copy of Maine Certifi Resume Three Letters of Refe	nager, Therapist, chnician Applicants cation	:
NOTE AN			

NOTE: All application materials become the property of Child Development Services. Providing any false or misleading information on this application or in the employment screening process shall be fully sufficient to refuse to employee the applicant or, if the applicant has been employed, to immediately dismiss the applicant / employee. Employment cannot be finalized until the application has completed requirements for complete background checks and fingerprinting as required by Maine State Statute.