

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.*

Persons applying for Administrative Support positions: Persons applying for the following positions:

Please complete ALL sections, except #4 and #6. Case Manager, Therapist, Teacher, Educational Technician

Please complete ALL sections.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **CDS site applying to:** | [ ]  Aroostook | [ ]  Reach | [ ]  First Step | [ ]  Two Rivers | [ ]  Midcoast |
|  | [ ]  Opportunities | [ ]  PEDS | [ ]  Downeast | [ ]  York | [ ]  State Office |

**SECTION 1. Criminal History Records Check (“CHRC”)**

All employees of Child Development Services are required to obtain CHRC approval from the Maine Department of Education (“DOE”) based on fingerprints. The DOE requires a fee that is due with the initial application and an additional fee upon requesting for fingerprinting at an approved location. All fees associated with the CHRC are at the applicant’s expense.

Have you completed the CHRC approval process through the DOE? [ ]  Yes [ ]  No If yes, please provide a copy of your CHRC approval card.

**SECTION 2.**

Position Applying for: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Full Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Previous Name(s): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Mailing Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Telephone Number(s): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

When will you be available? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Social Security #: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Desired Salary: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Are any of your immediate family members (including in-laws) currently employed by Child Development Services? [ ]  Yes [ ]  No

If yes, please explain: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Are you eligible to be lawfully employed in this country? [ ]  Yes [ ]  No

|  |
| --- |
| **Veterans’ Preference:** Maine law provides a preference to qualified veterans and gold star spouses by ensuring they are offered an interview. If you are a veteran or a gold star spouse and wish to take advantage of this preference, please indicate by checking the appropriate box below. Documentation is required. For more information, visit the following website: <https://www.maine.gov/bhr/state-jobs/veterans-preference-in-job-applications> |
|  | [ ]  Not Claimed[ ]  Veteran (requires DD Form 214)[ ]  Gold Star Spouse (requires DD Form 1300 |

**SECTION 3. Education**

Persons applying for Case Manager, Therapist, or Teacher positions must provide a copy of transcripts, including grades, from all colleges / universities attended.

School Attended Address Number of Years Attended Degree Awarded

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**SECTION 4. Certification**

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

Type State Date Issued Date of Expiration

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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If you do not hold a Maine certification, for what type of Maine certificate are you applying and eligible? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**SECTION 5. Special Skills**

What computer programs and office machines are you familiar with? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

What other special skills and training do you have or licenses do you hold that may be relevant to this position? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**SECTION 6. Transportation**

This position requires traveling to a variety of locations to deliver services. Do you have reliable transportation? [ ]  Yes [ ]  No

**SECTION 7. Experience**

List all previous employment starting with the most recent job held. Please account for any gaps in employment during the past ten years. Use an additional page if necessary.

Persons applying for Case Manager, Therapist, Teacher or Educational Technician positions, must provide a resume. In addition to educational background and work experience, include extra-curricular activities in which you have been involved.

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

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**SECTION 8. References**

List three, two of whom are most recent supervisors, who can comment on your ability and whom we may contact.

Persons applying for Case Manager, Therapist, Teacher or Educational Technician positions, must provide three letters of reference from persons who are not related to you (may be from references listed below).

Name Position Address Telephone

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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**SECTION 9. Background**

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 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 below, including, with respect to court actions, the date, offense in question, and the address of the court involved. Use additional sheets if necessary. Conviction or other disposition of a crime is not necessarily an automatic bar to employment.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**SECTION 10. 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 Child Development Services contacts in connection with my employment application to fully provide Child Development Services 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 Child Development Services, 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.

Applicant Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**SECTION 11. Checklist**

The completed employment application cannot be evaluated unless all of the following materials have been provided:

 Additionally, for Case Manager, Therapist,

For All Applicants: Teacher, Educational Technician Applicants:

[ ]  Application form, fully completed [ ]  Copy of Transcript(s)

[ ]  Gaps in employment during the past ten years [ ]  Copy of Maine Certification

[ ]  “Yes” to any of the questions in the Background section [ ]  Resume

[ ]  Criminal History Records Check Approval Card [ ]  Three Letters of Reference

[ ]  Application signed

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.