

# Forest Hills Consolidated School

## RSU 82 / MSAD # 12

Serving the Towns of Jackman & Moose River  
606 Main Street Jackman, Maine 04945  
T: 207.668.5291 F: 207.668.4482  
www.sad12.org

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### EMPLOYMENT APPLICATION GUIDANCE COUNSELOR

RSU 82 / M.S.A.D. #12 DOES NOT DISCRIMINATE IN THE OPERATION OF ITS EDUCATIONAL AND EMPLOYMENT POLICIES  
AND WILL HONOR ALL APPROPRIATE LAWS RELATIVE TO DISCRIMINATION

NAME: \_\_\_\_\_

DATE: \_\_\_\_\_

POSITION(S) APPLYING FOR: \_\_\_\_\_

AVAILABLE START DATE: \_\_\_\_\_

PHYSICAL ADDRESS: \_\_\_\_\_

MAILING ADDRESS: \_\_\_\_\_

PHONE NUMBER: \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_

**EDUCATION:** Transcripts, including grades, from all colleges/universities attended must be provided. Please complete this section accurately.

College/University Attended	Degree Awarded (if any)	Dates Attended	Grade Point Average
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

**CERTIFICATION:** List certification(s) you hold. Please provide copies of certifications

TYPE	STATE	DATE ISSUED	DATE OF EXPIRATION
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

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

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

**NOTE:** Candidates who do not hold a current Maine certification should direct an inquiry to the Maine Department of Education, Division of Certification and Placement, State House Station #23, Augusta, ME 04333-0023 or via phone at (207) 624-6603. All employees of a school district, must be approved to work by the Maine Department of Education.

**EXPERIENCE:** Please provide a complete résumé with your application. 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. You may attached additional pages, if necessary.

**\*Please account for any gaps in employment on a separate sheet.**

From (month/year) To (month/year) Position Employer Name and Address

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Years of guidance counselor experience: \_\_\_\_\_

**BACKGROUND:**

Question (please check the appropriate answer)	Yes	No
Have you ever been disciplined, discharged, or asked to resign from a prior position?		
Have you ever resigned from a prior position after a complaint had been received against you or your conduct was under investigation or review?		
Has your contract in a prior position ever been non-renewed?		
Have you ever not been nominated for re-employment in a prior position or ever had your nomination for re-employment not be approved?		
Have you ever been charged with or investigated for sexual abuse or harassment of another person?		
Have you ever been convicted of a crime (other than a minor traffic offense)?		
Have you ever entered a plea of guilty or "no contest" (nolo contendere) to any crime (other than a minor traffic offense)?		
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?		
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)?		

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 questions, 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.

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**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).

Name Position Address Phone

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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 RSU 82/M.S.A.D. #12 contacts in connection with my employment application to fully provide RSU 82/M.S.A.D. #12 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 RSU 82/M.S.A.D. #12, 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 CHECK LIST

This application cannot be evaluated unless all of the following items are provided:

- \_\_\_\_\_ Application form fully completed
- \_\_\_\_\_ Copies of Transcript(s)
- \_\_\_\_\_ Copies of Maine Certification(s)
- \_\_\_\_\_ Résumé
- \_\_\_\_\_ Gaps in employment during the past ten years explained
- \_\_\_\_\_ YES answers to any of the questions in the Background section explained
- \_\_\_\_\_ Three letters of reference
- \_\_\_\_\_ Application signed

NOTE: All application materials become the property of RSU 82/M.S.A.D. #12. None will be returned. Providing false or misleading information on this application or in the application screening process shall be fully sufficient grounds to refuse to employ the applicant or, if the applicant has been hired, to immediately dismiss the applicant/employee. Employment cannot be finalized until the applicant has completed requirements for complete background check and fingerprinting as required by Maine State Statute.

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#### FOR OFFICE USE ONLY

Date Received in Office: \_\_\_\_\_ Received by: \_\_\_\_\_ Forwarded to: \_\_\_\_\_  
Superintendent's Signature: \_\_\_\_\_ Forwarded to: \_\_\_\_\_ Date Filed: \_\_\_\_\_