APPLICATION
Criminal history record checks on educational personnel

All employees of school systems and persons employed by others on behalf of school systems who are not certified or authorized will be required to obtain a Criminal History Record Check (CHRC) approval from the Department of Education based on fingerprints. Approval is not intended to reflect the individual’s qualifications or ability to perform the job assigned. All approval cards valid for 8 weeks upon submission of an approval application and $15 to the Certification Office. In order to continue employment in an approval category after the 8 week period, the individual must be fingerprinted at an approved fingerprint site during the 8 week temporary approval period. Once the Certification Office receives the criminal history record information and clears the application, a 5 year card will be issued.

You must have your fingerprints taken at a Maine approved fingerprint site. Fingerprint taken for other purposes and at other places (such as your local police station) will not be accepted.

To receive an approval:

1. Send the approval application to the Department of Education (attached). A $15 non-refundable fee is to be sent with this application. Make money order payable to: Treasurer State of Maine (Personal checks not accepted).

2. Register online at http://www.informme.org/cgi-bin/doc/fingerprint.pl If you do not register, you will not be able to have your fingerprints taken. There is a one-time $55 fee for this process.

3. Take your confirmation number (received after registration) and a picture ID (a driver’s license or Maine State ID is preferred) to the fingerprint site.

APPLICATION
Complete the enclosed application and provide an explanation to questions answered “yes”. INCOMPLETE APPLICATIONS WILL BE RETURNED.

"YES' QUESTIONS
MAINE DEPARTMENT OF EDUCATION
APPLICATION FOR INITIAL EDUCATIONAL APPROVAL

1. NAME (First, M.I., Last, and optional suffix such as Jr., II)
2. Social Security Number
3. Other name(s) under which Your records are filed
   DATE

4. Mailing Address
5. FMAil Address
6. City or Town
7. State
8. Zip Code

9. Home Phone
10. Sex
   Male
   Female
11. Date of Birth
   mno. day ye.

RETURN TO: DEPARTMENT OF EDUCATION
CERTIFICATION OFFICE
23 STATE HOUSE STATION, AUGUSTA, ME 04333-0023

THE FOLLOWING QUESTIONS MUST BE ANSWERED:

1. Have you ever been convicted of ANY crime? _____ YES _____ NO

2. Have you ever had any occupational or professional license or credential suspended or revoked in any state, or voluntarily surrendered an occupational or professional license or credential? _____ YES _____ NO

3. Have you ever resigned following allegations of physical or sexual abuse? _____ YES _____ NO

If the answer is yes to any of the above, please attach a detailed explanation with required court documents. (See enclosed instructions.)

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.

SIGNATURE OF APPLICANT ________________________________ DATE __________________

Unless you receive an exception, you will be approved to be employed in the schools of Maine in a position for which you are otherwise qualified. The local school unit is responsible for determining whether you are otherwise qualified for a job category.

EFC-300-C
REV 12/12
THE FOLLOWING INFORMATION IS REQUESTED TO HELP US COORDINATE VOLUNTEER SERVICES AND TO ENSURE STUDENT SAFETY.

Legal Name: ______________________________

Physical Address: ______________________________

Telephone: ___________________________ E-mail Address: ______________________________

Emergency Contact: Name ___________________________ Telephone: ___________________________

Date of Birth (required for background check): ______________________________

Area(s) of interest for volunteering: ______________________________

NOTE: A Level II background check and clearance is required for any person wishing to serve as a Mentor, Volunteer Coach or will be involved in any other unsupervised long-term assignment. Level II is defined as requiring fingerprinting as part of the screening process.

Children in School: (Names and Grades): __________________________________________________________

Volunteer’s Employer (if applicable): ____________________________________________________________

List any education, training, or experiences you have which would help us in meeting the needs of our students: ____________________________________________________________

References: List three persons who can comment on your character and abilities whom we may contact if we have questions.

Name ___________________________ Address ___________________________ Phone ___________________________ Relationship ___________________________

______________________________

BACKGROUND:
The following information is asked of all individuals who volunteer to work with our children to help insure the safety of our students.

<table>
<thead>
<tr>
<th>Question</th>
<th>YES</th>
<th>NO</th>
</tr>
</thead>
<tbody>
<tr>
<td>Have you ever been charged with or investigated for sexual abuse or harassment of another person?</td>
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<tr>
<td>Have you even been convicted of a crime (other than a minor traffic offense)?</td>
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<tr>
<td>Have you ever entered a plea of guilty or “no contest” to any crime (other than a minor traffic offense)?</td>
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Continued on back
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 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 (attach additional page(s) if necessary). Conviction or other disposition of a crime is not necessarily an automatic bar to volunteering.

If you have lived outside of Maine, please identify the states and dates:

Refusal to provide authorization for criminal records and reference checks, or providing false or misleading information on this application shall constitute sufficient reason to deny the application or to terminate service as a volunteer.

I understand that the District performs Criminal Record checks on all volunteers who work in the schools. In addition, the District may check references if it believes it is warranted in a particular case. I authorize persons and entities contacted by the District in connection with this application to provide information about me. 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 the District, its agents and officials or against any provider of such information. I understand that if I am approved as a volunteer, that I will be required to sign a Volunteer Agreement. I further understand that the District reserves the discretion to deny my application or terminate my service as a volunteer any time it is deemed to be in the best interest of the District.

Applicant Signature ___________________________ Date ____________

OFFICE USE ONLY

_____ Application reviewed for completeness
_____ Application is considered a Level II Application

_____ References checked (attach documentation)
_____ Criminal record checked (documentation on file at Central Office)

Application approved: ________________
Application denied: ________________
Date: ____________________________