



Mackinac Island Public School

P.O. Box 340, Lake Shore Drive
Mackinac Island, MI 49757-0340

Phone (906) 847-3376
Fax (906) 847-3773

The following information must be provided:

- MIPS application
- A cover letter indicating your interest in the position
- A current resume
- Copies of transcripts

POSITION APPLYING FOR: _____

WHEN WOULD YOU BE ABLE TO BEGIN WORK: _____

Last Name: _____ **First Name:** _____ **M.I.** _____

Home Address: _____ **City:** _____ **State:** _____ **ZIP:** _____

Home Phone: (____) _____ **Cell Phone:** (____) _____ **Work Phone:** (____) _____

Are you a U.S. citizen, or are you authorized to work in the U.S.? _____

Current Employer: _____ **Position:** _____ **Salary:** _____

Business Address: _____ **City:** _____ **State:** _____ **ZIP** _____

Years in Position: _____ **Enrollment:** _____ **Number of Teachers:** _____ **Annual Budget:** _____

Are you currently certified or eligible to be certified for this position? _____ **If so, in what states?**

Educational History (Please begin with most recent degree and/or certification)

Additional classes, workshops, etc. (please log year attended.)

Administrative, Teaching and/or Support Staff Work Experience (List most recent first.)

Dates		Name and Address of Employer	Rate of Pay		Supervisor's Name And Title	Reason for Leaving
From MO/YR	To MO/YR		Start	Finish		
Phone					May we contact this person? Yes ___ No ___	
Describe in detail the work you did.						

Dates		Name and Address of Employer	Rate of Pay		Supervisor's Name And Title	Reason for Leaving
From MO/YR	To MO/YR		Start	Finish		
Phone					May we contact this person? Yes ___ No ___	
Describe in detail the work you did.						

Dates		Name and Address of Employer	Rate of Pay		Supervisor's Name And Title	Reason for Leaving
From MO/YR	To MO/YR		Start	Finish		
Phone					May we contact this person? Yes ___ No ___	
Describe in detail the work you did.						

Extracurricular/co-curricular coaching/ directing/ teaching experiences:

Have you ever attained tenure in a Michigan K-12 school district or intermediate district? _____

If yes, where was tenure granted? _____

I authorize the Mackinac Island Public School District to contact my references or any other references deemed necessary to ascertain the merits of my candidacy for this position. I authorize references to discuss my application and/or release information concerning me, and agree to hold them and the District harmless for providing and/or utilizing any information requested and/or provided.

I also request that my application and interest in the above mentioned position remain as confidential as possible under the applicable laws of the state. I understand that my candidacy may become a matter of public record when I am presented to the Board of Education. I further understand that elements of my resume may be available to the public and news media at such time. However, I request that reasonable effort be taken to maintain the confidentiality of this application and other documents and information which accompany my application for the position for which I am applying.

- Have you ever been convicted of a felony? Yes _____ No _____
- Are there currently any felony charges pending against you? Yes _____ No _____
- Have you ever been dismissed for cause from a position in a public or non-public school or child-care facility? Yes _____ No _____
- Have you ever had a teaching credential revoked, suspended or annulled in any state, territory or foreign country? Yes _____ No _____

If you answered yes to any of the above questions, you must attach a signed statement of explanation. Submit official copies of court records including dispositions of the case.

I hereby certify that the information in this employment application is true and correct to the best of my knowledge. I acknowledge that any misrepresentations, omissions or falsifications might be grounds for dismissal if employed for this position.

Signature _____ Date _____

The Mackinac Island Public School District does not discriminate on the basis of race, color, national origin, sex, age or disability in its programs and activities. Direct inquiries should be made to:

MIPS, 7846 Main Street, PO Box 340, Mackinac Island, MI 49757; (906)847-3376.

****MACKINAC ISLAND PUBLIC SCHOOL DISTRICT IS AN EQUAL OPPORTUNITY EMPLOYER****

FOR PERSONNEL USE ONLY

<u>Position</u>	<u>Interviewed By</u>	<u>Date</u>	<u>Transcripts Yes/No</u>	<u>Resume Yes/No</u>
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MACKINAC ISLAND PUBLIC SCHOOLS
OFFICE OF THE SUPERINTENDENT
7846 MAIN STREET
PO BOX 340
MACKINAC ISLAND, MI 49757
(906)847-3376

AUTHORIZATION FOR RELEASE OF INFORMATION
ON PROFESSIONAL CONDUCT PURSUANT TO
PUBLIC ACT 189 OF THE PUBLIC ACTS OF 1996
AND EMPLOYMENT HISTORY CHECK

APPLICANT'S NAME _____

SOCIAL SECURITY NO: _____ DATE: _____

I AUTHORIZE _____
(Current or most recent employer)

(Complete address)

to provide the Mackinac Island Public School District an information regarding my employment history and in addition, to disclose any other information which is job related, including all items within my personnel file and pursuant to Public Act 189 of the Public Acts of 1996 being section 380.1230b of the Michigan Compiled Laws, authorize my current and former employer(s) to disclose any unprofessional conduct and provide copies of all documents in my personnel record maintained by my current or former employer(s) relating to any unprofessional conduct as defined by Public Act 189 of 1996 which reads:

“Unprofessional conduct” means as 1 or more acts of misconduct; 1 or more acts of immorality, moral turpitude, or inappropriate behavior involving a minor; or commission of a crime involving a minor. A criminal conviction is not an essential element of determining whether or not particular act constitutes unprofessional conduct, MCL 380.1230b(8)(b).

I acknowledge the Mackinac Island School District's right to investigate all references and secure additional information regarding my employment, including disciplinary action and/or the events surrounding termination of employment.

Pursuant to PA 189 of 1996, I waive my right to prior notice under Bullard-Plawecki employee right to know act, Act No. 397 of the Public Acts of 1978, being section 423.506 of the Michigan Compiled Laws and I understand that Public Act 189 of 1996 releases the current or former employer and employees acting on behalf of the current or former employer, from any liability for providing information on unprofessional conduct and further release the Mackinac Island School District and its representatives from all liability for seeking such information.

Applicant's Signature

Date