

WEST HOLMES LOCAL SCHOOL DISTRICT
28 WEST JACKSON STREET
MILLERSBURG, OHIO 44654-1397
PHONE: (330) 674-3546 * FAX: (330) 674-2242

FOR OFFICE USE ONLY DATE APPLICATION RECEIVED _____ DATE OF INTERVIEW _____ DATE OF TRANSCRIPTS RECEIVED _____ DATE CREDENTIALS RECEIVED _____

PROFESSIONAL EMPLOYMENT APPLICATION AN EQUAL OPPORTUNITY EMPLOYER

Please print or type:

I. PERSONAL DATA

Social Security No. _____

Last Name First Name Middle Name

Current Address: _____
Number and Street City State Zip

Permanent Address: _____
Number and Street City State Zip

Home Phone: _____ Cell Phone: _____ Work Phone: _____

II. POSITION FOR WHICH APPLICATION IS MADE:

Full-time teaching _____ Part-time teaching _____ Substitute teaching _____

Level:
____ Elementary School ____ Middle School ____ High School
____ Special Ed. ____ Tutoring ____ Other (Music, PE, Art, Etc.)

Administration:
____ Elementary ____ Middle School ____ High School

Guidance:
____ Elementary ____ Middle School ____ High School

List any co-curricular or extra-curricular activities you are able to conduct: _____

Do you hold an Ohio Certificate? _____ What Grade? _____
(Temporary, 4 yr. prov., 8 yr. prov., permanent)

What type? _____ When Issued? _____ Date to Renew: _____

****This application will remain active for one year.***

III. TRAINING

	School or Institution Name	Diploma or Degree	Year of Graduation	Dates of Attendance From-To	Total Time Spent Years	Semester Hours
High School						
Junior College						
College						
Graduate Work						
Special						
TOTAL						

Total Semester hours' credit for courses in Education: _____

If an applicant for a High School position:

Major subject and semester hours of credit: _____

Minor subject and semester hours of credit: _____

Activities in High School and College, such as Speech, Dramatics, Clubs, Athletics, and Special Honors, etc.

High School: _____

College: _____

I completed my student teaching experience at:

Name of School City and State	Grades and Subjects Taught	Cooperating Teacher/Phone No.	Dates

IV. MILITARY SERVICE RECORD

Are you eligible for United States Military Service Credit? Yes _____ No _____

Date Served: From: _____ To: _____

V. TEACHING EXPERIENCE

Include all contracted positions you have held as a certified teacher. List chronologically with recent position first. In Ohio, 120 or more days' experience in the same school year equals one year.

Name of School/Address (include zip code)	Principal's Name and phone no.	Grades, Subjects Taught, and Related Assignments	Dates From	Dates To	Total Years

Total Years of teaching experience to date: _____
(120 or more days in the same school year equals one-year credit)

Have you ever been granted and/or taught under a continuing contract in Ohio? Yes ___ No ___

If so, where and when?

Are you currently under contract for the present school term? _____
When does your current contract expire? _____

Have you previously applied or been employed by this school district? _____

Have you ever been discharged or been requested to resign from a teaching position? _____ If so, explain: _____

VI. NON-TEACHING EXPERIENCE

List in chronological order with most recent position first.

Name of Employer	Address	Dates From	Dates To	Kind of Work

VII. REFERENCES

Give three references of people who have firsthand knowledge of your character, personality, scholarship, and teaching ability, including especially superintendents and principals under whom you have taught.

Name	Address	Official Position/Phone Number

VIII. MISCELLANEOUS INFORMATION

All applications for employment are subject to criminal records check through the Bureau of Criminal Identification and Investigation pursuant to the authority of Section 3319.32 and Section 109.57, Revised Code.

Have you ever been convicted of a felony? Yes _____ No _____ If yes, explain: _____

IX. STATEMENT

Write a brief statement, on another sheet of paper in your own handwriting, stating your teaching or other educational experiences and interest (extracurricular, coaching, recreational, travel, etc.) which would have a bearing upon your qualifications for the position you are seeking.

I hereby certify the above information, to the best of my knowledge, is true, accurate, and complete. Any falsification of this record will be sufficient cause for disqualification or dismissal after my employment (if I am hired). Furthermore, it is understood this application becomes the property of West Holmes Board of Education.

Date of Application

Signature of Applicant

The West Holmes Board of Education is an Equal Opportunity Employer. West Holmes Local School District reaffirms its policy to provide equal opportunity to all persons without regard to race, color, religion, sex, national origin, age, disability, and political affiliation.
