

Educational And Professional Training:

School	Major Subjects	Minor Subjects	Name & Location Of School	Years Spent	Diploma Or Degree Rec'd
College or University					
College or University					
Special Courses					

What is your cumulative grade point average?

Undergraduate:

Graduate:

Military Service:

Branch of Service:	Highest Rank:	Number of Months:
From:(M/Y)	To:(M/Y)	Type of Discharge

Current Administration:

Name & Location of School District:

From:(M/Y)

To:(M/Y)

Number of Students:

Administrative Experience:

List below the places where you have completed your professional experience.

Name of School	Address/ Telephone	Type Experience Grades/Subjects	No Yrs.	Annual Salary	Date Begin	Date Ended

Other experiences you believe to be significant.

Are you currently under contract for the following year?

References:

Please include BOTH,

1. 3 letters of reference, and
2. 5 other names to contact (listed below)

List five professional references, including board members, superintendents and principals with whom you have worked.

Name - Position	Address	Current Phone Number

List travel, recreational interests or hobbies which may be pertinent to the job for which you are applying.

Of what educational organizations are you a member?

Have you ever held a contract of employment from which you have been dismissed or not reemployed? Yes No

Have you every taught under a Continuing contract in the State of Ohio? Yes No
If yes, where?

Have you ever been convicted of or entered a plea of guilty or no contest to a felony and/or misdemeanor, other than a minor traffic violation? Yes No
If yes, please explain

At the time of actual employment and consistent with Ohio Law, verification of the response to this question will be obtained from the Ohio Bureau of Criminal Identification and Investigation and other state or federal agencies. The verification process will require submission of fingerprints. Information obtained about the convictions/charges will be evaluated to determine whether the nature of the offense permits or prohibits your employment.

STATEMENT

In the space below (in your own handwriting) make a statement concerning your attitude toward the education profession, your personal interests, plans and ambitions.

Signature of Applicant

Date

I hereby certify that 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 and, if employed, discharge. Furthermore, it is understood that this application becomes the property of the Governing Board of Education, which reserves the right to accept or reject it. I authorize the verification of **and thorough investigation of my past employment and of** all references and information contained in this application **and agree to cooperate in such investigation** and regard the information **gained during the investigation** as confidential, not to be revealed to me. Please understand that this application will be considered **a public document** and will **be released to the press** if requested.