



SWITZERLAND OF OHIO LOCAL SCHOOL DISTRICT

304 MILL STREET
WOODSFIELD, OH 43793
PHONE 740-472-5801 FAX 740-472-5806

OFFICE USE ONLY
DATE RECEIVED

EMPLOYMENT APPLICATION

PERSONAL INFORMATION

Application Date: _____ Social Security Number _____

Full Name _____ Date of Availability: Year _____ Month _____ Day _____

Previous or other surnames (s) reflected on employment or educational records _____

Previous Mailing Address: Street _____ Phone (_____) _____

City _____ State _____ Zip Code _____ Msg. Phone (_____) _____

Permanent Mailing Address: Street _____

City _____ State _____ Zip Code _____

Currently under contract with another school district? Yes _____ No _____

If yes: School District _____ City _____

"ANY PERSON WHO KNOWINGLY MAKES A FALSE STATEMENT IS GUILTY OF FALSIFICATION UNDER SECTION 2921.13 OF THE REVISED CODE, WHICH IS A MISDEMEANOR OF THE FIRST DEGREE."

EMAIL ADDRESS _____

POSITION APPLIED FOR

Please Check One:

ADMINISTRATIVE _____ CERTIFICATED _____ CLASSIFIED _____ SUBSTITUTE _____

If SUBSTITUTE, please check all that apply:

BUS DRIVER ___ BUS AIDE ___ COOK ___ CUSTODIAN ___ NURSE ___ TEACHER ___

EDUCATIONAL AIDE ___ MECHANIC ___ SCHOOL SECRETARY ___ COURIER ___

If not a SUBSTITUTE, what position are you applying for: _____

Current Ohio Educational Aide Permit - Teaching License - Administrative License - Nurse License

Ohio Department of Education State ID# _____

Type (s) _____

Degree (s) Bachelor Minus _____ Bachelor _____ Bachelor Plus 150 _____ Master _____ Master Plus 15 _____

Endorsements/Certifications _____

Date of Expiration _____

Added Endorsements Expected _____

Educational Aide Permit Issued Date _____ Expiration Date _____

If no Ohio License, when is it expected? Month _____ Year _____

Semester Hours Total from Transcripts _____

IF INTERVIEWED FOR A POSITION YOU WILL BE REQUIRED TO BRING OFFICIAL TRANSCRIPTS WITH YOU OR HAVE THEM SENT TO US PRIOR TO YOUR INTERVIEW.

EQUAL OPPORTUNITY INFORMATION

Ohio school districts are equal opportunity employers and comply with all applicable state and federal statutes and regulations in employment and school district programs.

Background checks are done on all district employees; those can be done here at the Central Office.

Are you a citizen of the United States? Yes No

If no, are you authorized to work in the U.S.? Yes No

Have you ever worked for this company? Yes No

If yes, when? _____

EDUCATIONAL AND PROFESSIONAL BACKGROUND

High School, Colleges, Universities Name, City, State	Dates Attended Mo/Yr to Mo/Yr	Type of Degree Earned	Major & Minor (if any)
High School			
College/University			

PREVIOUS EMPLOYMENT

Company/School _____ Phone _____ Supervisor _____

Address _____

Job Title _____ Starting Salary \$ _____ Ending Salary \$ _____

Responsibilities _____

From _____ To _____ Reason for Leaving: _____

May we contact your previous supervisor for a reference? Yes No

Company/School _____ Phone _____ Supervisor _____

Address _____

Job Title _____ Starting Salary \$ _____ Ending Salary \$ _____

Responsibilities _____

From _____ To _____ Reason for Leaving: _____

May we contact your previous supervisor for a reference? Yes No

Company/School _____ Phone _____ Supervisor _____

Address _____

Job Title _____ Starting Salary \$ _____ Ending Salary \$ _____

Responsibilities _____

From _____ To _____ Reason for Leaving: _____

May we contact your previous supervisor for a reference? Yes No

REFERENCES

Give references (a minimum of three), especially superintendents or principals under whom you have taught, who have first-hand knowledge of your character, personality, and teaching ability.

Name	Position/District	Address	Work Phone	Home Phon

EXPERIENCE OTHER THAN TEACHING - ADMINISTRATIVE - EDUCATIONAL AIDE

OTHER LANGUAGES: Please list any foreign language(s) you can use. _____

Fluent skills (speak, read, write) _____

Minimal skills (please list abilities) _____

Actual language training _____

ELEMENTARY APPLICANTS: Check areas in which you have training or experience to the extent the skill(s) could be used in class.

Teach PE ___ Teach Art ___ Teach Vocal Music ___ Etc. ___

IS THERE ANYTHING YOU WOULD LIKE TO TELL US ABOUT YOURSELF?

DISCLAIMER AND SIGNATURE

I certify that my answers are true and complete to the best of my knowledge. If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.

Signature: _____ Date: _____

This application does not constitute an offer of employment or contract.
All employees are an Equal Opportunity Employer and will not unlawfully discriminate against the applicant.