

APPLICATION FOR EMPLOYMENT

Lakota Local Schools

5200 C.R. 13

Kansas, OH 44841

Telephone: 419-986-6650 Fax: 419-986-6651

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First Name: _____ Middle Name: _____ Last Name: _____

Social Security #: _____ Gender: _____ Male _____ Female

Permanent Address: _____

City: _____ State: _____ County: _____ Zip Code: _____

Phone#: _____ E-mail Address: _____

Currently receiving retirement benefits? _____ Yes _____ No Retirement System: _____

Position Applying for: _____ Elementary _____ Middle School _____ High School _____ Administrative

List all areas of Certification: _____

Have you ever taught under a continuing contract in Ohio? _____ Yes _____ No

If so, where and how many years? _____

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Are you able to direct/coach any of the following activities?
_____ Speech _____ Girls Sports _____ Drama _____ Boys Sports

_____ Clubs, specify: _____

Activities, specify: _____

Referral Source:
_____ Newspaper _____ Employee Referral _____ Walk-in applicant
_____ Other, specify _____

Have you ever applied for a position with this school district? _____ Yes _____ No

If yes, when? _____

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EDUCATION

Institution: _____

Address: _____

Dates attended: **From:** _____ **To:** _____

Certificate/Degree: _____

EDUCATION

Institution: _____

Address: _____

Dates attended: **From:** _____ **To:** _____

Certificate/Degree: _____

EDUCATION

Institution: _____

Address: _____

Dates attended: **From:** _____ **To:** _____

Certificate/Degree: _____

EDUCATION

Institution: _____

Address: _____

Dates attended: **From:** _____ **To:** _____

Certificate/Degree: _____

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PROFESSIONAL EMPLOYMENT HISTORY

Employer: _____

Address: _____

Phone: _____ **Immediate Supervisor:** _____

Grades/Subjects Taught: _____ **Employed from** _____ **to** _____

PROFESSIONAL EMPLOYMENT HISTORY

Employer: _____

Address: _____

Phone: _____ **Immediate Supervisor:** _____

Grades/Subjects Taught: _____ **Employed from** _____ **to** _____

PROFESSIONAL EMPLOYMENT HISTORY

Employer: _____

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PROFESSIONAL EMPLOYMENT HISTORY

Employer: _____

Address: _____

Phone: _____ **Immediate Supervisor:** _____

Grades/Subjects Taught: _____ **Employed from** _____ **to** _____

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REFERENCES

Name: _____ **Address:** _____

Phone: _____

Name: _____ **Address:** _____

Phone: _____

Name: _____ **Address:** _____

Phone: _____

Name: _____ **Address:** _____

Phone: _____

Name: _____ **Address:** _____

Phone: _____

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GENERAL INFORMATION

If employment is offered, can you submit a birth certificate, social security card, and certificate of U.S. citizenship or verification of your legal right to work in the U.S. _____ Yes _____ No

If employment is offered, can you produce personal identification such as a U.S. Passport, a driver's license, or photographic identification card issued by the state? _____ Yes _____ No

Have you ever been convicted of a felony: _____ Yes _____ No

If yes, please explain: (An affirmative response will not automatically disqualify you from being considered as a candidate for employment.) _____

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Have you taken the National Certification Exam? _____ Yes _____ No
If yes, when? _____ Passing Score? _____ Yes _____ No

Please write a brief statement explaining why you are interested in a position with Lakota Local Schools.

Complete and return this form to:

Lakota Local Schools
Administrative Offices
5200 C.R. 13
Kansas, OH 44841
Phone: 419-986-6650 Fax: 419-986-6651

This application is used as a file of information to support your candidacy. Please feel free to submit any items which may be helpful.

This application will be considered active for twenty-four (24) months from the date filed. If you are hired, it becomes a part of your official employment record.

I certify that the information given in this application is true to the best of my knowledge. I authorize the Lakota Local Schools and its designee(s) to conduct an appropriate reference check. I further certify that I have not been convicted of a felony or sex-related offense, and hereby authorize the Board of Education and its designee(s) to perform such background investigations as required by law. The fee for the background investigation is to be paid by the applicant who is the finalist for the for the position. This policy also applies to all persons added to substitute lists. Failure to comply will result in the disqualification of the applicant for employment consideration. I agree that any claim or lawsuit relating to my service with Lakota Local Schools must be filed no more than six (6) months after the date of the employment action that is the subject of the claim or lawsuit. I waive any statute of limitations to the contrary.

Signature: _____

Date: _____

We are committed to a multicultural environment in which women, minorities, veterans, and individuals with disabilities authorized to work in the United States are invited to apply for employment. Lakota Local Schools is an Equal Opportunity Employer.