Allen County ESC
Allen East Local
Bath Local
Bluffton Ex. Village
Delphos City

Allen County Public Schools

APPLICATION FOR EMPLOYMENT

Allen County Educational Service Center
1920 Slabtown Road
Lima, OH 45801
419-222-1836 , FAX: 419-224-0718
Brian K. Rockhold, Superintendent

Elida Local
Lima City
Perry Local
Shawnee Local
Spencerville Local

EQUAL OPPORTUNITY EMPLOYERS **PLEASE WRITE LEGIBLY**

This is an official application for employment in the school districts of Allen County, Ohio.

Date _____ E-mail Address: _____

Name _____ Social Security #: _____
Last First Middle

Present Address: _____ Phone (____) _____
Street/Road City/State Zip Code Area Code

Permanent Address: _____ Phone (____) _____
Street/Road City/State Zip Code Area Code

Position Applying For: **Please check ALL that apply.**

☐ **Teaching** ☐ **Substitute** ☐ **Pre-K – 3** _____ ☐ **Gr. 4-9 (list areas of certification)** _____
☐ **Secondary** ☐ **7-12 (list areas of certification)** _____
☐ **Gifted** ☐ **Special Education**

List grades or subjects in order of preference for which you are applying:

1. _____ 2. _____ 3. _____

Co-curricular activities that you can direct: _____

Districts Interested In: **(✓ all that apply)**

☐ **Allen County ESC** ☐ **Bath** ☐ **Delphos** ☐ **Lima City** ☐ **Shawnee**
☐ **Allen East** ☐ **Bluffton** ☐ **Elida** ☐ **Perry** ☐ **Spencerville**

Licensure Area:

State: _____ Effective: _____
Grades or Subjects on License: _____
Date of Availability: _____
Are you under contract? _____

Mark Type (License) Applicable:

_____ 2 Yr. License
_____ 5 Yr. License
_____ Permanent
_____ 4 Yr. Resident Educator License
_____ Elementary Principal
_____ High School Principal
_____ Supervisor
_____ Asst. Superintendent
_____ Superintendent

Teaching Experience: **(Start with most recent)** **Total Years (year is a minimum of 120 days)** _____

Name of School & Location	Grades and/or Subjects	Dates of Service		Administrator

Have you ever been granted a continuing contract in a school district in Ohio?
☐ NO ☐ YES in the _____ School District in _____ County

Other Work Experience: **(List chronologically with most recent experience first.)**

Employer, Address, Phone Number	Position	Supervisor	Length of Employment

Educational History: **(Start with high school and list all colleges attended. If you have not yet graduated, please list degree and date anticipated.)**

School Name	Location	Major Course of Study	Dates	Degree
High School Attended:				
Colleges/Universities:				

Student Teaching School District: _____ Grades/Subjects: _____

Supervising Teacher: _____

References: **List persons who have first-hand knowledge of your professional training, teaching ability/experience, and character. Include any school superintendents, principals, supervisors, or administrators** *(if no teaching experience, list other references, i.e. student teaching, college professors, etc.).*

Name	Complete Address	Telephone	Position

Address of Placement Office where current credentials may be obtained:

_____

Please Respond to All of the Following Questions

1. Have you passed a Praxis II test?
   ☐No ☐Yes If yes, please name the Praxis II test that you passed: _____

2. Have Are you a National Board Certified Teacher?
   ☐No ☐Yes

3. Are you proficient with word processing, spreadsheets, PowerPoint, etc.?
   ☐No ☐Yes

4. Are you comfortable with using the Internet as a research tool and for e-mail?
   ☐No ☐Yes

5. Can you setup and use a projector and other multi-media equipment?
   ☐No ☐Yes

You may attach a separate sheet giving any additional information which would help evaluate you for a position.

This application will be placed on file for consideration when vacancies occur. It should be complete and accurate in every detail. If you are employed, it will be necessary for you to furnish the school district that employs you an original transcript and your original certificate/license. Applications mailed to the Allen County Educational Service Center will be forwarded to each of the member districts. A personal interview with the School District Superintendent is required. Applicants will be notified of the proper time to appear for interviews.

As a potential candidate for employment, you are hereby notified that a satisfactory Federal and Ohio criminal records check is a precondition for employment.

My signature below authorizes the school district to conduct any investigation necessary to determine my qualifications for employment, and authorizes release of information in connection with this application. I certify that I have made true, correct and complete responses on this application, and that to do otherwise is reason not to employ or to discharge if I am employed by any district.

_____ _____

Signature of Applicant **Date**