Full-time Teaching		Substitute Teaching
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Date

HANCOCK COUNTY EDUCATIONAL SERVICE CENTER

7746 CR 140 • Findlay, OH 45840 (419) 422-7525 • Fax (419) 422-8766

"Meeting Student Needs Through Cooperative Efforts"

TEACHER APPLICATION

PERSONAL

IERSONAL				
Last Name	First	Middle		
Temporary Address		Phone		
City, State, Zip		Business Phone		
Permanent Address		Phone		
City, State, Zip		Email		
When will you be available to begin work?				
Have you ever applied for employment with us?	☐ Yes ☐ No)		
If yes, month & year	Location			
Position desired/grade level:				
Are you legally eligible for employment in the United St	ates? Yes	N o		
Are you a U.S. citizen?				
List the activities you could direct/coach:				
List special training and skills:				
Are you under contract for next year? Yes No				
College credential are available at:		Phone		
NOTE: A current résumé should be included with this application.				
Prospective employees will receive consideration without discrimination because of race, creed, color, sex, age, national origin, handicap or veteran status.				
The information provided in this Application for Employment is true, correct, and complete. If employed, any misstatement or omission of fact on this application may result in my dismissal. I understand that acceptance of an offer of employment does not create a contractual obligation upon the employer to continue to employ me in the future.				

Signature

EDUCATION

Schools	Name and Location of Schools	Dates Attended	Major/Minor	Sem. Hrs.	Subjects/Grade Level on Cert.	
College		From:				
		То:				
College		From:				
		То:				
High School						
Other						
Licenses held a	and expiration dates:					
QUALIFICA	TIONS					
In your own ha	ndwriting, describe your assets t	that make you the best	qualified candidat	e:		

TEACHING/RELATED EDUCATIONAL EXPERIENCES:

I.	School/Organization Name	Phone	
	Address	Employed (Month/Year)	
		From	То
	Name of Supervisor		
	Job Title/Description of Work:	Reason for Leaving:	
II.	School/Organization Name	Phone	
	Address	Employed (Month/Ye	ear)
		From	То
	Name of Supervisor		
	Job Title/Description of Work:	Reason for Leaving:	
pers 1.	cipal, cooperating teacher and/or supervising teacher under whom you have taught who have conality, scholarship, and teacher ability. References will be checked for all HCESC had Name: Address: Phone:	ired staff.	
2.	Name:Address:		
	Phone:		
3.	Name:		·
	Address:		
	Phone:		

PRE-EMPLOYMENT REQUIREMENTS:

I have been advised and understand that:

- 1. The background information supplied by an applicant for a position will be checked by the Hancock County Educational Service Center to assure the accuracy of the data furnished and the past performance record of the candidate.
- 2. I authorize the Hancock County Educational Service Center to make such investigations and inquiries of my personal, employment and related matters as may be necessary in arriving at its employment decision. I hereby release current and past employers, schools or persons from liability in responding to inquiries in connection with my application for employment.
- 3. I understand that as a precondition to employment in the position for which I am applying I must provide a set of fingerprints and satisfactorily pass a criminal record check if I come under final consideration for employment. I authorize such a records check and agree to pay any costs associated with the fingerprinting and criminal records check requirement.
- 4. I understand that any offer of employment is conditional upon the Hancock County Educational Service Center receiving a satisfactory record check from the Ohio Bureau of Criminal Investigation (BCI) and from the Federal Bureau of Investigation (FBI). I understand that if the criminal record check is not satisfactory, that a local board of education is not permitted by state law to employ me and must release me from any conditional contracts of employment.
- 5. I certify that all the information that I have provided to the Hancock County Educational Service Center is complete and accurate and is submitted with the intent that a local board of education will rely on this information in making its employment decisions. I understand that, should the employer discover that I have falsified any such information, I will not be hired, or if already hired, will be subject to termination from employment on that ground.

6.	This information is valid from one year from the date of the BCI/FBI record check. Consideration after this time
	period will once again require the applicant to complete all pre-employment requirements.

		Applicant's	Signature	
This application show	ld he choused with the	Date		
This application should	id de shared with the	following schools:		
☐ Arcadia	☐ Arlington	☐ Cory-Rawson	☐ McComb	
Liberty-Benton	Riverdale	☐ Van Buren	☐ Vanlue	
For Office Use Only				
	Renewal Dates			