

"AN EQUAL OPPORTUNITY EMPLOYER"



# Claymont City Schools

Ph: 740-922-5478 \* Fax: 740-922-7325

## CERTIFIED EMPLOYMENT APPLICATION

**Return to:**  
Superintendent  
Claymont City Schools  
201 N. Third Street  
Dennison, OH 44621  
Email: brentsch@claymontschools.org

RC 3319.393 "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."

FULL TIME: \_\_\_\_\_  
SUBSTITUTE: \_\_\_\_\_

Date: \_\_\_\_\_  
Applicant Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_  
Phone: \_\_\_\_\_  
Email: \_\_\_\_\_

POSITION APPLYING FOR		
<u>TEACHER</u>	<u>GRADE LEVEL</u>	<u>SUBJECT AREA</u>
Elementary	_____	_____
Jr. High	_____	_____
High School	_____	_____
Special Education	_____	_____
<u>ADMINISTRATOR</u>		
Elementary	Middle School	High School
_____	_____	_____
_____	_____	Other _____

### PERSONAL DATA

### CERTIFICATION/LICENSE

Date of Birth: \_\_\_\_\_  
Military Service: YES \_\_\_ NO \_\_\_ No. of Yrs: \_\_\_\_\_

Certificate: \_\_\_\_\_  
State: \_\_\_\_\_  
Type: \_\_\_\_\_  
Valid Areas: \_\_\_\_\_  
Expires: \_\_\_\_\_

Please provide a copy of your certification/licenses

### EDUCATION

High School	Name _____ City _____ State _____	Year Graduated _____
Undergraduate	Name _____ City _____ State _____	Attended _____ thru _____ Degree _____
Undergraduate	Name _____ City _____ State _____	Attended _____ thru _____ Degree _____
Graduate Study	Name _____ City _____ State _____	Attended _____ thru _____ Degree _____
Graduate Study	Name _____ City _____ State _____	Attended _____ thru _____ Degree _____
Graduate Study	Name _____ City _____ State _____	Attended _____ thru _____ Degree _____

Total Accumulated Semester Hours of Credit

## TEACHING/WORK EXPERIENCE

List teaching and other work experience: (list most recent experience first)

NAME OF EMPLOYER: _____	PHONE: _____	
ADDRESS: _____	Supervisor: _____	
Job Title: _____	Beginning Salary: _____	Final Salary: _____
From: _____	To: _____	Reason For Leaving: _____

NAME OF EMPLOYER: _____	PHONE: _____	
ADDRESS: _____	Supervisor: _____	
Job Title: _____	Beginning Salary: _____	Final Salary: _____
From: _____	To: _____	Reason For Leaving: _____

NAME OF EMPLOYER: _____	PHONE: _____	
ADDRESS: _____	Supervisor: _____	
Job Title: _____	Beginning Salary: _____	Final Salary: _____
From: _____	To: _____	Reason For Leaving: _____

1. Total teaching experience in school years: \_\_\_\_ (A school year is defined as a period of not less than 120 school days in the same school year)
2. Have you ever held a continuing contract (tenure) in Ohio? YES: \_\_\_\_ NO: \_\_\_\_ If yes, name of school district: \_\_\_\_\_
3. Are you presently under contract with a school district for next school year? YES: \_\_\_\_ NO: \_\_\_\_ If yes, name of school district? \_\_\_\_\_

List any extra curricular activity or club you would be willing to advise or coach:

## REFERENCES

List at least 3 professional references. (DO NOT include relatives.)

NAME: _____	PHONE: _____
ADDRESS: _____	
No. of Years Known: _____	

NAME: _____	PHONE: _____
ADDRESS: _____	
No. of Years Known: _____	

NAME: _____	PHONE: _____
ADDRESS: _____	
No. of Years Known: _____	

I hereby affirm that the information on this application (and accompanying resume, if any) is true and complete to the best of my knowledge. I also agree that any falsified information or significant omissions may disqualify me from further consideration for employment and may be considered justification for dismissal if discovered at a later date.

I authorize a thorough investigation of my past employment activities. I agree to cooperate in such investigation, and release from all liability or responsibility all persons, school districts and corporations requesting or supplying such information. I further authorize any physician or hospital to release any information which may be necessary to determine my ability to perform the job for which I am being considered or any future job in the event I am hired. I understand that according to federal law, all individuals who are hired must, as a condition of employment, produce certain documentation to verify their identity and U.S. citizen status or, if aliens, their legal authorization to work in the U.S. As a consequence, I understand that any offer of employment would be contingent on my ability to produce the required documentation within the time period required by the law.

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_