RITTMAN EXEMPTED VILLAGE SCHOOL DISTRICT

Application for Employment of Certified Positions

Print Full Name: _____ Date: _____

Current Address: _____

City: _____ State: _____ Zip: _____

Home Phone #: ( )_____ Cell Phone #: ( ) _____

EDUCATION, TRAINING AND EXPERIENCE:

Highest level of Education:

- ☐ High School Diploma Where: _____
- ☐ College/University Where: _____
- ☐ BA When received _____ Number of Hours _____
- ☐ BS When received _____ Number of Hours _____
- ☐ Masters When received _____ Number of Hours _____

Describe any specialized training, apprentice, skills and extra-curricular activities:

_____

_____

License # : _____

List any certificate(s) or license(s) you currently hold:

Type: _____ Subject listed: _____ Expiration: _____
Type: _____ Subject listed: _____ Expiration: _____
Type: _____ Subject listed: _____ Expiration: _____

Praxis Test 1 Score: _____ Praxis Test 2 Score: _____ Praxis Test 3: ☐ Yes ☐ No

GPA: Major _____ Complete _____

My license has never been suspended or revoked. Signature: _____

Student Teaching: _____
(Subject or grade) (School) (School Address)

_____
(Principal's name) (Supervising teacher)

Are you employed in education at the present time? _____
If yes, indicate the school system and position: _____

_____

Are you under contract now? _____ If yes, give expiration date: _____
When would you be available for employment in Rittman? _____

Present occupation if not in education: _____
Number of days you were absent this past year: _____
If hired, on date can you start working? _____ / _____ / _____

Should you be a leading candidate for employment, you will be required to provide a set of fingerprints for a criminal records check (BCI/FBI), Ohio Revised Code 3319.39. Certain criminal convictions may disqualify from some or all positions of employment.

MILITARY SERVICE:

Branch: _____ Rank In Military: _____

Total Years of Service: _____ Skills / Duties: _____

JOB HISTORY:

Previous employer: _____ Phone: _____
Job Title: _____ Dates employed: _____
Work performed: _____
Reason for leaving: _____

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Job Title: _____ Dates employed: _____
Work performed: _____
Reason for leaving: _____

REFERENCES:

Name: _____ Occupation: _____
Address: _____ Phone: _____

Name: _____ Occupation: _____
Address: _____ Phone: _____

I hereby certify that the facts set forth in the above employment application are true & complete to the best of my knowledge. I understand that if employed, falsified statement shall be considered sufficient cause for dismissal. (You are authorized to make any investigation of my personal history through any investigative agencies or bureaus of your choice.)

Signature: _____

NOTIFICATION: No person shall on the basis of race, color, religion, sex, national origin, age, disability, genetics or military status be denied employment by the Rittman Exempted Village School District.

For Office Use Only:

Date Received: _____ Initials: _____

BOE Approval: _____ Initials: _____