

Tri-Valley Local Schools

36 East Muskingum Avenue, P.O. Box 125
Dresden, Ohio 43821
Phone: (740) 754-1442 ~ Fax: (740) 754-6400

FOR OFFICE USE ONLY

Date application received _____

Date of interview _____

TEACHING APPLICATION FORM

(Applications remain active for one year)

Please Print or Type

An Equal Opportunity Employer

I. PERSONAL DATA

Date _____

Social Security No. _____

Last Name First Name Middle Name

Current Address: _____

Number & Street City State Zip

Area Code and Phone Number

To assist in maintaining contact with me, here is the name, address and phone number of a person who will always know where I may be reached:

Name Address Area Code & Phone Number

II. TEACHING PREFERENCE AND COMPETENCIES

Level Preferred: (Please indicate your level of certification)

Elementary (K-3) _____ Middle School (4-8) _____ High School (9-12) _____

What is your level of certification: _____

Position preferred: (Please include subject and/or grade level)

1st Choice _____ 2nd Choice _____

List other subjects you are qualified to teach: _____

List any activities you are willing to direct: (school clubs, plays, debate, etc.) _____

List any sports you are willing to coach: (volleyball, football, intramurals, etc.) _____

Please indicate preference(s) for assignment: (check all that apply)

Regular Substitute Tutor Part Time Summer School

I will be available to start teaching: _____

Date

III. CERTIFICATIONS/LICENSE

List all Ohio Teaching Certificates and/or Licenses that you hold. If you have a license pending, please indicate the type and expected date of issuance.

Name of Ohio Teaching Certificates/Licenses	Date Issued	Date of Expiration	Certificate Number	Subjects or Grades Appearing on Certificates/Licenses

~Please attach Praxis Scores

IV. TRAINING

	Training or Institute Name	Diploma or Degree	Year of Graduation	Dates of Attendance To - From	Total Time Spent - Years	Semester Hours
High School						
Jr. College						
College						
Graduate Work						
					TOTAL	

Total semester hours credit for courses in education: _____

If an applicant for a high school position:

Major subject and semester hours of credit: _____

Minor subject and semester hours of credit: _____

Activities in high school and college, such as Speech, Dramatics, Clubs, Athletics, Special Honors, etc.

High school: _____

College: _____

I completed my student teaching experience at:

Name of School City and State	Grades and Subjects Taught	Cooperating Teacher Name and Phone Number	Dates To From

V. MILITARY SERVICE RECORD

Are you eligible for United State Military Service Credit: Yes _____ No _____

Date Served: From: _____ To: _____

VI. TEACHING EXPERIENCE

Include all contracted positions you have held as a certified teacher. List chronologically with recent positions first. In Ohio, 120 or more days experience in the same school year equals one year.

Name of School/Address <i>(please include zip code)</i>	Principal's Name and Phone Number	Grades, Subjects Taught and Related Assignments	Dates From To	Total Years

Total years of teaching experience to date: _____

Have you ever been granted and/or taught under a continuing contract in Ohio? Yes _____ No _____

If so, where and when? _____

Are you currently under contract for the present school term? _____ If so, when does your current contract expire? _____

Have you previously applied or been employed by this school district? _____ If so, when _____

Have you ever been discharged or been requested to resign from a teaching position? _____ If so, explain _____

VII. NON-TEACHING EXPERIENCE

List in chronological order with most recent position first.

Name of Employer	Address/Phone Number	Dates of Employment From To	Type of Work

Give three references of people who have first hand knowledge of your character, personality, scholarship, and teaching ability, including especially superintendents and principals under whom you have taught:

<u>Name</u>	<u>Address/Phone Number</u>	<u>Official Position</u>
1. _____		
2. _____		
3. _____		

VIII. MISCELLANEOUS INFORMATION

All applications for employment are subject to a criminal records check through the Bureau of Criminal Identification and Investigation pursuant to the authority of Section 3319.32 and Section 109.57, Revised Code.

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

If yes, explain: _____

IX. STATEMENT

On a separate sheet of paper write a brief statement explaining why you are interested in a position with the Tri-Valley Local Schools and what would be your main contribution to the district.

Signature

Date

Launch Internet Explorer Browser.Ink

revised 01/2004