

Application for Employment

Highlands Community Learning Center

Please type or print in black ink

Personal Information:

| | | | |
|--|-------|---|---|
| Last Name | First | Middle | Date of Application |
| Street Address | | | Social Security No. |
| City | State | ZIP Code | Telephone No. Home: () Work: () Cell: () Email: |
| Are you presently under contract to another district? | | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| If yes, when does the contract expire? | | | |
| Date available for employment? | | | |
| Current base salary? <i>(Not including fringe benefits)</i> | | Base salary expectations? <i>(Not including fringe benefits)</i> | |
| Do you hold a valid Ohio Teaching Certificate or License? | | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| Type of certificate? | City | Local | Other <i>(Indicate)</i> |
| Certificate Number? | | | |
| Have you ever been convicted of a felony? | | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| If yes, please explain on a separate sheet of paper. Note: Candidates are subject to a criminal background check. | | | |

Current School District Information:

| | | |
|-------------------------------|------------------------------------|---|
| Name of district? | | Your title? |
| Enrollment (ADM)? | School District Budget? | Total Number of Employees? Certified - Classified - |
| Number of Elementary Schools? | Number of Middle/Jr. High Schools? | Number of High Schools? |

Educational History:

| School name | Location (city, state) | Major course or subject | Dates attended | | Graduated | | Degree |
|-----------------------------|---------------------------|----------------------------|----------------|----|-----------|----|--------|
| | | | From | To | Yes | No | |
| High school | | | | | | | |
| College (list all attended) | | | | | | | |
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Professional Experience:

Starting with present or most recent, list all previous employers. If more space is required, please continue on a separate sheet. You may attach resume, but complete application as well.

| No. of Years | Dates | | Position Title | School District/ Organization, Address | Reason for Leaving |
|-----------------|-------|----|----------------|---|--------------------|
| | From | To | | | |
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Other Work Experience and Achievements Valuable to Your Career:

Outside Activities:

Professional/Work References:

Please list below the names and address of five persons who can speak of your professional competency and character.

| | |
|---------------------------------------|----------------------------------|
| Name | Type of Acquaintance |
| Street Address, City, State, ZIP Code | Phone Home: () Business: () |
| Name | Type of Acquaintance |
| Street Address, City, State, ZIP Code | Phone Home: () Business: () |
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| Name | Type of Acquaintance |
| Street Address, City, State, ZIP Code | Phone Home: () Business: () |

Does the board of education or its agents have your permission to contact the above named persons? Yes No

Does the board of education or its agents have your permission to contact your current employer? Yes No

What are your most important qualifications that will make you the successful candidate?

Identify Two of Your Major Accomplishments in your career:

Identify Two Projects That Didn't Get Accomplished Despite Your Best Effort and Why:

Applicant's Signature:

I certify that the information in this application is true and accurate to the best of my knowledge and belief.

I hereby authorize Highlands Community Learning Center or its agents to conduct such investigations and to obtain such records (including criminal and credit records) as HCLC deems necessary. I understand that giving false or misleading information, either oral or written, may result in denial or termination of my employment.

I understand that HCLC observes a standard of strict confidentiality with regard to information submitted by applicants. However, I understand that Ohio public records laws may mandate disclosure of applicant information by HCLC conducting the search

Signature of Applicant

Date

If any of your educational or employment records are under other than the above name, please provide other names.

A Complete Application Consists of the Following:

1. Receipt of a letter of application emphasizing your abilities and reasons for interest in the open position.
2. Receipt of completed and signed application form.
3. Receipt of up-to-date resume.
4. *Receipt of a copy of current Ohio School Teaching Certificate or evidence one is obtainable.
5. *Receipt of your university placement file and/or transcript of credits.
6. You may submit any information or material you feel is relevant to your qualifications for this position.

* Such information sent to HCLC will be kept on file for one year.

**Send All Application Materials to:
Highlands Community Learning Center
6909 Smoky Row Road
Worthington, Ohio 43235**

Applicants are considered for all positions without regard to sex, religion, color, age, national origin, size, handicap, race, ancestry, citizenship status, or status as a Vietnam era or special disabled veteran.

An Equal Opportunity Employer