

APPLICATION FOR EMPLOYMENT-SUPERINTENDENT WAUSEON EXEMPTED VILLAGE SCHOOLS

LAST NAME: _____ FIRST NAME: _____
 ADDRESS: _____
 TELEPHONE: _____ (HOME) _____ (WORK) _____ (CELL)

EDUCATION

Please include college transcript(s).

COLLEGE: _____	GRAD DATE: _____	DEGREE: _____
COLLEGE: _____	GRAD DATE: _____	DEGREE: _____
COLLEGE: _____	GRAD DATE: _____	DEGREE: _____

OHIO DEPARTMENT OF EDUCATION CERTIFICATION

LICENSE NUMBER _____ TYPE _____
 ISSUE DATE ____/____/____ VALID FROM ____/____/____ THRU ____/____/____
 OR EXPLAIN HOW A SUPERINTENDENT LICENSE CAN BE OBTAINED SOON: _____

EXPERIENCE-SUPERINTENDENT

CURRENT POSITION: _____ DATE OF EMPLOYMENT: _____
 SCHOOL/INSTITUTION: _____ LOCATION: _____
 CURRENT STUDENT ENROLLMENT: _____ CURRENT ANNUAL BUDGET:\$ _____ RATE OF PAY:\$ _____
 TOTAL NUMBER OF STAFF: _____ NUMBER OF STAFF REPORTING DIRECTLY TO YOU: _____

List other superintendent position experience in reverse chronological order:

WHERE EMPLOYED	WHEN	DUTIES
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

SUPERINTENDENT APPLICATION

APPLICANT NAME: _____

EXPERIENCE – OTHER

Please give accurate, complete full-time and part-time employment information beginning with the most recent employer.

Employer	Job Title	
Address (street, city, state, zip)		
Phone	Dates (from/to)	Total Years
Supervisor	Rate of Pay	
Job Duties		

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Job Duties		

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Address (street, city, state, zip)		
Phone	Dates (from/to)	Total Years
Supervisor	Rate of Pay	
Job Duties		

You must answer each of the following questions yes or no. **If you answered Yes to any question, attach an explanation to this application.**

1. Have you ever had ANY certificate, license, or permit, or an application for same, revoked, suspended, limited or denied?

YES NO

2. Have you ever surrendered ANY certificate, license, or permit?

YES NO

SUPERINTENDENT APPLICATION

APPLICANT NAME: _____

PROFESSIONAL REFERENCES			
NAME	POSITION	PHONE	ADDRESS
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

PERSONAL REFERENCES			
NAME	RELATIONSHIP	PHONE	ADDRESS
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Notifications

I acknowledge being informed that, as a precondition to employment in the position for which I am applying, I must in accordance with Ohio Law provide a set of fingerprints and satisfactorily pass a criminal records check. If a criminal records check indicates that an employee has been convicted of or plead guilty to any of the offenses described in R.C. 109.572 (A) (1), the employee will be informed of the Board's actions.

I hereby authorize the Northwest Ohio Educational Service Center and Wauseon Exempted Village School District to obtain from my former or other current employers all data needed to support this application.

With the understanding that falsification of any information furnished on this application is grounds for the rejection of this application or, if I am approved, dismissal after my approval, I certify that all such information is true and complete to the best of my knowledge, and I hereby authorize agents of the Northwest Ohio Educational Service Center, Wauseon Exempted Village School District, and those acting in accordance with their direction to investigate same. I understand that any such investigation may include, but need not be limited to, a prescreening, an inquiry to the Ohio Bureau of Criminal Identification and Investigation and to other law enforcement agencies; I accordingly agree to cooperate promptly and fully during the application process in being fingerprinted and otherwise in completing and signing all forms required for any such inquiry, and I acknowledge that my failure to cooperate shall cause the rejection of my application. Further, I hereby give my permission to the Ohio Bureau of Criminal Identification and Investigation and other law enforcement agencies, as well as any and all other persons and entities who might have knowledge concerning information that I have provided on this form, to disclose to agents of the Northwest Ohio Educational Service Center, Wauseon Exempted Village School District, and those acting in accordance with their direction all pertinent information in their possession (except to the extent that I have expressly stated otherwise on this form), and I release those so requesting, receiving, and providing that information and their respective agents and principals, from any and all liability in connection therewith to the full extent permitted by law, and I voluntarily authorize the Northwest Ohio Educational Service Center and Wauseon Exempted Village School District to contact any references whose names I have submitted. I voluntarily release this agency and any persons providing information from any liability and claims relating to the use of information obtained.

Signature

Date

Wauseon Exempted Village School District and Northwest Ohio Educational Service Center are equal opportunity employers and do not discriminate on the basis of race, color, national origin, gender, disability, religion, ancestry, socio-economic status, sexual orientation, citizenship, veteran status, genetic information, or any other unlawful basis in its educational program, activities, employment policies, or admission policies and practices, as required by law. Qualified applicants who are disabled and require special assistance in responding to an employment announcement should call 567.444.4806.