APPLICATION FOR EMPLOYMENT

TO CERTIFIED POSITION

AN EQUAL OPPORTUNITY EMPLOYER

DOVER CITY SCHOOL DISTRICT

BOARD OF EDUCATION

228 WEST SIXTH STREET DOVER, OHIO 44622

		Date	of Application
NAME:			
(Last)		(First)	(Middle)
PRESENT ADDRESS:			
	(Street)	(City, State)	(Zip Code)
PERMANENT ADDRESS	3:		
	(Street)	(City, State)	(Zip Code)
Number of Years at above	e present address:		
Email Address:			
Telephone Number: (Ch	neck which preferre	d) Home:	
		Cell:	
Date Available:			
Position Applying for: (Check one)	Elementa	ary School	High School
	Middle So	chool	Other:
140			(Specify)
			in Ohio?
	Expires w	hen?	
Are you interested in beir	ng involved in any o	f the following activities?	
Athletics; pl	ease specify:		_
Clubs/Activit	ies; please specify:	:	
After-School	Tutoring/Academic	Services	

Referral Source:	Online	Job Posting	Employee Referral	
	Walk –i	n applicant	Other: (please specify)	
Have you ever applied for a position with the school district?				
Yes	No	If "Yes", when?	?	
Have you ever been Yes	. , ,			
Are you currently employed?				
Yes	No	If "Yes", where, and in	what position?	

EDUCATION DATA					
	School Name City and State	Degree Received	College Major and Minor	Average Grade/ GPA	No. of Semester Hours
Elementary School Last Attended					
High School Graduated From					
College					
College					

In the following spaces give a complete record of your teaching experience, including periods of unemployment, if any. Begin with most recent teaching employment and work back. Also, list student teaching experience.

TEACHING EMPLOYMENT HISTORY				
Employer:	Employed:	Starting position:		
Address:	FromMo/			
Telephone:	ToMo/\	Other positions held:		
Grades or subject taught:	Immediate supervisor:			
Т	EACHING EMPLOYMENT HIS	ORY		
Employer:	Employed:	Starting position:		
Address:	FromMo/	r Last position:		
Telephone:	ToMo/Y	Other positions held:		
Grades or subject taught:	rades or subject taught: Immediate supervisor:			
TEACHING EMPLOYMENT HISTORY				
Employer:	Employed:	Starting position:		
Address:	FromMo/			
Telephone:	ToMo/\	Other positions held:		
Grades or subject taught:	Immediate supervisor:			

ADDITIONAL INQUIRIES CONCERNING EMPLOYMENT

Are you authorized to work	in the United S	states?			
Yes	No				
May we contact your emplo	yer(s)?		er:Yes /er(s):Yes		No No
Please identify any exception	ons and reasor	ns for not contacting	g:		
	MI	LITARY EXPERIEN	ICE		
Have you ever served in the	e U.S. Armed F	orces?	Yes		No
Describe any special job-re	lated training r	eceived:			
	OT	HER SPECIAL SKI	LLS		
Describe any other special	job-related skil	ls, employment pos	sitions or qualifica	tions tha	t would support
your application:					
		NCES: Please list t			
Name	A	ddress	Phone Numb	er H	low Long Known
IN CASE OF EMERGENCY	OR ACCIDEN	NT, whom shall we i	notify?		
Name:					
Home Address:	Business Address:				
Home Telephone:	Business Telephone:				

Please write a brief statement explaining why you are School District.	interested in a position with the Dover City
	
What do you think the main objectives of education in	the United States should be today?
<u>APPLICANT'S S</u>	<u>STATEMENT</u>
I hereby affirm that the information on this application (and the best of my knowledge. I also agree that any falsified if from further consideration for employment and may be considered.	information or significant omissions may disqualify me
I authorize a thorough investigation of my past emplo investigation, and release from all liability or responsibility a or supplying such information.	
I understand that according to federal law all individuals produce certain documentation to verify their identify and to work in the US. As a consequence, I understand that ability to produce the required documentation within the time	U.S. citizen status or, if aliens, their legal authorization any offer of employment would be contingent on my
ANY PERSON WHO KNOWINGLY MAKES A FALSE S SECTION 2921.13 OF THE REVISED CODE, WHICH IS A	
Signature of Applicant	Date