



Hicksville Exempted Village Schools
 958 East High Street
 Hicksville, Ohio 43526
 419.542.7636

Date Received _____
 Date Interviewed _____

Application for Professional Employment

The Hicksville Exempted Village School District is dedicated to the provision of equal educational opportunities and equal employment opportunities without regard to race, creed, economic status, national origin, sex or handicap.

Personal Data	Name _____		Application Date _____	
	Present Address _____		Telephone _____	
	_____		_____	
	Permanent Address _____		Telephone _____	
_____		_____		
Social Security Number _____				
Are you a U.S. Citizen?				
<input type="checkbox"/> Yes <input type="checkbox"/> No				

Teaching Preferences and Competencies	Position(s) To Which You Are Applying:			
	<input type="checkbox"/> Elementary	(_____)	<input type="checkbox"/> Special	(_____)
		Grade levels in order of preference		Area
	<input type="checkbox"/> Middle School	(_____)	<input type="checkbox"/> Guidance	(_____)
		Grade levels in order of preference		
	<input type="checkbox"/> High School	(_____)	<input type="checkbox"/> Administration	(_____)
		Grade levels in order of preference		Position
	Extracurricular Assignment Interest: Check any of the following activities which you are qualified and willing to coach or direct. Use a double check to show actual coaching or directing experience.			
	<input type="checkbox"/> Yearbook	<input type="checkbox"/> Drama	<input type="checkbox"/> Class Sponsor	<input type="checkbox"/> Student Council
	<input type="checkbox"/> Football	<input type="checkbox"/> Basketball	<input type="checkbox"/> Baseball	<input type="checkbox"/> Track
<input type="checkbox"/> Cross Country	<input type="checkbox"/> Volleyball	<input type="checkbox"/> Softball	<input type="checkbox"/> Wrestling	
<input type="checkbox"/> Golf	<input type="checkbox"/> Cheerleading	<input type="checkbox"/> Clubs	<input type="checkbox"/> Other _____	

Certification	Type of Ohio Teaching Certificate/License You Hold	Date Issued	Date of Expiration	Certificate Number	Subjects or Grades Appearing on Certificate/License

Note: Please submit a copy of all valid Ohio certificates/licenses with this application.

Legal	Have you ever been convicted of a felony?
	<input type="checkbox"/> Yes <input type="checkbox"/> No
If yes, please attach an explanatory statement.	

Academic Preparation for Teaching

School	Name and Location	Date Attended	Diploma or Degree	Total Semester Hours	Major	Minor	GPA	Distinction or Honors
High School								
College or University								

Total Number of **Semester** Hours Earned: _____ Undergraduate _____ Graduate

Semester Hours in Your Teaching Field(s) _____ in _____ GPA _____

_____ in _____ GPA _____

Note: Copies of all transcripts should be submitted with this application. 3 Quarter Hours = 2 Semester Hours

Professional Experience

School	Position	Date		Total Years	Reason for Leaving
		From	To		

Are you presently under contract?

Yes No If yes, to whom? _____

If yes, why do you wish to leave? _____

Have you ever been employed under a continuing contract in Ohio?

Yes No If yes, to whom? _____ on _____ Date _____
School System

Have you ever been discharged or requested to resign from a teaching position?

Yes No If yes, explain? _____

Have you previously applied for a position in the Hicksville Exempted Village School District?

Yes No

Other Work Experience

Firm	Location	Kind of Work Performed	Dates of Service

List experiences you have had working with children (outside of school).

Home _____

Community _____

Camp _____

Other _____

Military

Have you served in the military? _____ If so, list active service dates _____

Service Branch _____ Honorably Discharged? _____ Rank at Discharge _____

Significant duties/honors _____

References

Please list at least THREE professional references.

Experienced teachers MUST include the names of principals and/or superintendents under whom they have worked, including the most recent supervisor or administrator. Beginning teachers MUST include the name of the cooperating teacher.

NOTE: If you have a current placement file, please request that it be sent to us.

Professional References

Name _____, Position or Occupation _____

Address _____, Phone Number _____

Name _____, Position or Occupation _____

Address _____, Phone Number _____

Name _____, Position or Occupation _____

Address _____, Phone Number _____

Personal Reference

Name _____, Position or Occupation _____

Address _____, Phone Number _____

Do we have permission to contact the above mentioned persons?

Yes No

Have you requested your placement file be sent to us?

Yes No

Professional Recognitions

Briefly describe any professional recognition, memberships, and growth activities:

In the space below, please include any other pertinent data or information, not previously requested on the application, which might assist us in arriving at a more realistic appraisal of your training, experience, and overall competence for the position for which you are applying :

STATEMENT OF JOB APPLICANT REGARDING CRIMINAL RECORD
(O.R.C. 3319.39)

I, _____, have not been convicted of, or entered a guilty plea to, any of the following offenses or any prior or existing laws of Ohio which are substantially similar or any prior or existing laws of another state or the federal government which are substantially similar:

2903.01	Aggravated murder	2907.07	Importuning	2919.12	Unlawful abortion
2903.02	Murder	2907.08	Voyeurism	2919.22	Endangering children
2903.03	Voluntary manslaughter	2907.09	Public indecency	2919.23	Interference with custody (child stealing)
2903.04	Involuntary manslaughter	2907.12	Felonious sexual penetration	2919.24	Contributing to unruliness or delinquency of a child
2903.11	Felonious assault	2907.21	Compelling prostitution	2919.25	Domestic violence
2903.12	Aggravated assault	2907.22	Promoting prostitution	2923.12	Carrying concealed weapons
2903.13	Assault	2907.23	Procuring	2923.13	Having weapons while under disability
2903.16	Failing to provide for a functionally impaired person	2907.25	Prostitution	2923.161	Improperly discharging a firearm at or into a habitation or school
2903.21	Aggravated menacing	2907.31	Disseminating matter harmful to juveniles	2925.02	Corrupting another with drugs
2905.01	Kidnapping	2907.32	Pandering obscenity	2925.03	Trafficking in drugs
2905.02	Abduction	2907.321	Pandering obscenity involving a minor	2925.04	Illegal manufacture of drugs or cultivation of marihuana
2905.04	Child stealing (former law)	2907.322	Pandering sexually oriented matter involving a minor	2925.05	Funding of drug or marihuana trafficking
2905.05	Child enticement	2907.323	Illegal use of minor in nudity-oriented material or performance	2925.06	Illegal administration or distribution of anabolic steroids
2907.02	Rape	2911.01	Aggravated robbery	2925.11	Drug possession (other than minor offense)
2907.03	Sexual battery	2911.02	Robbery	3716.11	Placing harmful objects in food or confection
2907.04	Corruption of a minor	2911.11	Aggravated burglary		
2907.05	Gross sexual imposition	2911.12	Burglary		
2907.06	Sexual imposition				

OR

ANY FELONY, OR ANY OFFENSE OF VIOLENCE, THEFT OFFENSE, OR DRUG ABUSE OFFENSE, UNDER EITHER STATE LAW OR ANY SIMILAR MUNICIPAL ORDINANCE, THAT IS NOT A MINOR MISDEMEANOR.

Signature _____ Date _____

*If you cannot sign this form for any reason please write an explanation on a separate page or discuss directly with the hiring officer.

ADDITIONAL QUESTIONS FOR APPLICANT

1. Have you ever been charged with one of the offenses listed above, and subsequently been convicted of, or pleaded guilty or no contest to, a lesser offense based on the same incident?

Yes No

If "YES", please give details below:

2. Have you ever been convicted of, or pleaded guilty or no contest to, an ATTEMPTED version of any of the offenses listed above?

Yes No

If "YES", please give details below:

3. Have you ever been subject to an investigation for child abuse conducted by a Children's Services agency or a law enforcement agency?

Yes No

If "YES", please give details below and indicate the results of the investigation:

Signature _____ Date _____