## ADA EXEMPTED VILLAGE SCHOOLS

725 W. NORTH STREET ADA, OHIO 45810

## CERTIFIED TEACHER APPLICATION

## Return to: Ada Exempted Village School Telephone: 419-634-6421 Superintendent's Office Fax: 419-634-0311 725 W. North Street, Ada, Ohio 45810 Date of application: \_\_\_\_\_ Date available: \_\_\_\_\_ Social Security # \_\_\_\_ - \_\_\_ - \_\_\_ - \_\_\_ \_\_\_ Name: Last First Middle Present Address: \_\_\_\_\_ Street City State Zip Telephone: Home: (\_\_\_\_) \_\_\_\_- \_\_\_\_ School/Work: (\_\_\_\_) \_\_\_\_-Area Code Area Code POSITION(S) SOUGHT: Regular Teacher Substitute Teacher Early Childhood \_\_\_\_\_ Pre-Kindergarten through 3 \_\_\_\_ Middle Childhood (4-9) \_\_\_\_\_ Adolescent – Young Adult (7-12) \_\_\_\_ Special Areas \_\_\_\_\_ CERTIFICATION AREA: **CERTIFICATION:** Please list all valid Ohio certificates that you currently hold. *Include photocopies of certificates with this application.* **EDUCATIONAL BACKGROUND:** List the high school, colleges and universities that you have attended along with the degree earned. High School, Colleges, Universities attended Degree **CURRENT DEGREE:**

School District Name	<u>Grade/Subject</u>	<u>Years</u>	From To
			<del></del>
Total of years full-time tea	aching experience:		<del>-</del>
NON-TEACHING WORK I			_
			poopie simie.
Extra-Curricular Activit			ider eccepina en
Please list extra-curricula directing once you becam		vouia cons	ider coaching or
Baseball	Golf		Softball
Basketball	National Hon	or Soc.	Student Coun
Cheerleading	Newspaper		Swimming
Class/Club Advisor	Physical Con	ditioning	Tennis
Cross Country Drama Club	Playground M Quiz Bowl	donitor	Track
Football	Soccer		Volleyball Yearbook
			Other
Please list <b>extra-curricul</b> directed:	ar activities that you	currently	direct or have
ESSAV OHESTION. The	Ada Superintendent	and Doomd	of Education and
<b>ESSAY QUESTION:</b> The interested in what traits of			
candidate. What gains w		_	_
community members thro			
the space below.	ough your mining? Pie	ease nana	write and timit to
the space below.			
the space below.			
the space below.			

<b>CONTRACT:</b> Have you ever had a teaching contract non-renewed in Ohio another state for any reason? YesNo If yes, please explain:					
REFERENCES	: List below names of prof	Tessional references ar	nd community		
people, who have first-hand knowledge of your professional work, character, personality, and scholarship.					
<u>Name</u>	<u>Address</u>	<u>Phone</u>	<u>Title</u>		
l					
ł					
ii addition, no	t professional organization				
	<b>FATUS:</b> Please give a brief	explanation of your c			
CONTRACT ST			urrent contract		
status.	_	-			
status. Current distric Expiration date	t/company:e:				
status. Current distric Expiration date	t/company:e:				
status. Current distric Expiration date Contract type:	t/company:e:				
status. Current distric Expiration date Contract type: ETHICAL STA conduct or mis	t/company:	ienced any problems	with your		
status. Current distric Expiration date Contract type: ETHICAL STAR conduct or mis	t/company:e:	ienced any problems	with your		
status. Current distric Expiration date Contract type:  ETHICAL STA  conduct or mis character into	t/company:	ienced any problems vither that have broug	with your ht your		
status. Current distric Expiration date Contract type:  ETHICAL STATE conduct or mis character into	MDARDS: Have you expersion of expersion of the answer is yes, please the charged and/or contracts.	rienced any problems vither that have broug school/work? ease explain on a separa	with your ht your ate sheet.		

**RECORDS CHECK:** The Ada School system routinely completes a record check on new employees and your initials are needed to indicate that you grant permission for the district to complete a police/BCI/FBI records check if you are placed in final consideration for this position.

I have no problem with submittin	g to a records check:
	Initials
Documents	to be returned with application:
1	Cover Letter
2	Completed District Application
3	Current Resume
4	Copy of Certificate(s)
5	Unofficial Copies of Transcripts
6	BCI/FBI Fingerprint Report
7	Copy of Driver's License and S.S. Card
Individuals completing this application to be	added to our substitute list need only return Items 2, 4, 6 & 7.

## CERTIFICATION OF APPLICANT

I hereby authorize the Ada Exempted Village Schools to obtain from my employers all data needed to support this application. I hereby authorize Ada Exempted Village Schools to obtain from the references listed any information needed to support his application. I certify that the information given in this application is true to the best of my knowledge and that I am certified/qualified to hold the position indicated.

	Signature of Applicant
Date:	

Ada Exempted Village Schools 725 W. North Street Ada, Ohio 45810

> Phone: 419-634-6421 Fax: 419-634-0311

Ada Exempted Village Schools is an equal opportunity employer. Ada Schools does not discriminate based on sex, age, handicap, race, religion, color or creed.