



Professional Employment Application

2100 38th Street NW
Canton OH 44709
330/492-8136

Last Name _____ First Name _____ Middle Initial _____

Street Address _____

City _____ State _____ Zip Code _____

Telephone (____) _____

Are you prevented from lawfully becoming employed in this country because of Visa or Immigration Status?

Yes No

(Proof of citizenship or immigration status will be required upon employment - I-9 Form)

Citizen of U.S.? Yes No

Social Security Number _____

Are you employed in education at the present time?

Yes No

If yes, indicate school system and position

Present occupation if not in education

Date _____

Indicate position for which you are applying:

Full-time teaching

Administration

Indicate Certificate/License type:

Pre-Kindergarten

Kindergarten

Primary (K-3

Middle (4-9)

High School (7-12)

Adolesc to Young Adult (7-12)

Adult (7-12)

Multi-Age (PK-12)

Intervention Specialist

Vocational/Career Tech (4-12)

Superintendent

Early Childhood (PK-3)

Principal

Pupil Services

Administrative Specialist

Are you under contract at the present time? Yes No If yes, give expiration date _____

Have you ever been granted a continuing contract (tenure) in a school district in Ohio?

No Yes in the _____ School District in _____ County

When would you be available for employment in the Stark County Educational Service Center?

(You MUST include a copy of your VALID Ohio certificate(s) with the completed application. If you do not hold Ohio certification, you must contact the Ohio Department of Education, Curtis Hewitt, 614/466-3593, to apply for Ohio certification)

(Note: This office does not hire full-time employees for any district. To ensure consideration for full-time employment, please make application directly to districts where you desire employment. This application will be used for employment in the Stark County Educational Service Center or shared with districts requesting applicants with your area of certification.)

NOTIFICATION: No person shall, on the basis of race, color, creed, or sex, be denied employment by the schools of Stark County.

Vision - Service - Leadership

TEACHING AND SCHOOL ADMINISTRATION EXPERIENCE (use first line for student teaching or internship.)

Name/Address of School	Subjects and grades taught and administrative position(s) held	Dates	
		From	To

SUBJECT PREPARATION

List grade level(s), or if secondary, subjects you are certified to teach in order of preference.		
1.	3.	5.
2.	4.	6.

COLLEGES/UNIVERSITIES ATTENDED

Name of School	Dates		Degree	Academic and/or Teaching Majors	Semester Hours
	From	To			

TEACHING, SUPERVISORY, AND ADMINISTRATIVE CERTIFICATES HELD

Certificate #	State	Type	Area(s) listed on Certificate	Date Issued	Date Expires

ACADEMIC AND PROFESSIONAL REFERENCES (If experienced educator, include superintendents, principals, or supervisors under whom you worked.)

Name	Address	Position	Telephone

OTHER WORK EXPERIENCE

Name and address of employer	Nature of work	Dates	
		From	To

EXPERIENCE IN WORKING WITH YOUTH (other than teaching)

Organization	Dates	Age Group	Responsibilities

SPECIAL INTERESTS (i.e., coaching, club advisor, etc.)

EXPLAIN BRIEFLY WHY YOU WISH TO BE EMPLOYED BY THE STARK COUNTY SCHOOLS

APPLICATION

We appreciate the time and interest you have given in making application to the Stark County Educational Service Center. We hope to reciprocate this by giving your application prompt consideration. Upon receipt of your application it will be processed and placed in our active file for consideration when openings occur. If you have other questions concerning employment in the Stark County Educational Service Center or the county itself, we will make every effort to answer them for you. **ALL APPLICATIONS SHOULD BE RENEWED ANNUALLY.**

SALARY SCHEDULE

Professional employees are placed on the current salary schedule in accordance with their training and experience.

FRINGE BENEFITS

Longevity pay, medical insurance, life insurance, professional and personal days and sick leave are a few of the benefits.

SCHOOL YEAR

The term of service constituting a school year provides for a minimum of 180 days of classroom instruction and additional days at the option of the local district.

CERTIFICATION/LICENSURE

The individual employee assumes the responsibility of obtaining and renewing certification/licensure which must be filed with the Superintendent of Schools as a condition of employment.

READ CAREFULLY BEFORE SIGNING:

I agree that any claim or lawsuit relating to my service with the Stark County Educational Service Center or any of its subsidiaries must be filed no more than six (6) months after the date of the employment action that is the subject of the claim or lawsuit. I waive any statute of limitations to the contrary.

Signature _____

Date _____

"I hereby certify that the answers on this application are true and correct to the best of my knowledge and belief and that any deliberate misrepresentation of fact contained herein may be grounds for invalidating any contract commitments resulting from this application. I understand that my employment will be subject to the laws of the State of Ohio and to the job descriptions and policies adopted by the Stark County Educational Service Center."

Signature _____

Date _____

It is understood and agreed that the Stark County Educational Service Center may contact former employer(s) for verification of my employment history and compliance with the Bureau of Criminal Identification and Investigation (BCI) for a background check and I hereby consent to such inquiries.

I understand that if I am employed prior to the District's receipt of the BCI or FBI report and verification of my work experience, my continued employment will be conditioned on: 1) satisfactory work experience as verified by contacts with former employers; and 2) receipt of a report demonstrating that I am in compliance with the Board of Education's rules and regulations and any other legal requirements regarding applicant/employee criminal records, disclosure of convictions, and proper certification.

I further understand that falsification of any and all information on this application or any employment documents or failure to obtain proper certification shall result in my being disqualified from employment or in my employment being terminated. By affixing my signature, I agree to the conditions listed on this application and knowingly waive any rights I may have under Ohio law to challenge the disqualification/termination.

SIGNATURE _____

DATE _____

Return this application to:
Stark County Educational Service Center
Attn: Linda Berkebile, Adm Secretary/Personnel
2100 - 38th Street N.W. • Canton, OH 44709