

Zane Trace Local School District
 946 State Route 180
 Chillicothe, OH 45601
 Phone (740) 775-1355
 Fax (740) 775-0249

Application for Certificated Staff

The Zane Trace Local School District is an equal opportunity employer and does not discriminate on the basis of age, sex, race, religion, color, disability, or national origin in the educational programs and activities it operates.

APPLICANT INFORMATION:

Last Name	First	M.I.
Street Address		Apartment/Unit #
City	State	Zip
Phone		Cell Phone
E-Mail Address		
Position Applied For:		

CERTIFICATION/LICENSURE:

Certification/License Type	Certification/License Number	Date Issued	Date Expires	Subjects or grades appearing on certificate/license

EDUCATION:

High School		Address	
From	To	Did you graduate?	Emphasis
Diploma	Date of graduation		

College		Address	
From	To	Did you graduate?	Major
Degree	Date of degree	# of quarter hours	# of semester hours

College		Address	
From	To	Did you graduate?	Major
Degree	Date of degree	# of quarter hours	# of semester hours

Other		Address	
From	To	Did you graduate?	Major
Degree	Date of degree	# of quarter hours	# of semester hours

NOTE: Originals of all valid Ohio certificates/licenses and college/university transcripts will be required to complete the employment process. Submit when requested.

Total years of teaching experience:

Most recent teaching experience. Please start with your present or last position and work in reverse:

School District or Business		Phone	
Address		Supervisor	
Grades/Subject Taught:	Starting Salary \$	Ending Salary \$	
Responsibilities:			
From	To	Reason for leaving	
Full Time or Part Time:			

School District or Business		Phone	
Address		Supervisor	
Grades/Subject Taught:	Starting Salary \$	Ending Salary \$	
Responsibilities:			
From	To	Reason for leaving	
Full Time or Part Time:			

School District or Business		Phone	
Address		Supervisor	
Grades/Subject Taught:	Starting Salary \$	Ending Salary \$	
Responsibilities:			
From	To	Reason for leaving	
Full Time or Part Time:			

REFERENCES: *Please list three professional references*

Full Name	Relationship
Company	Phone
Address	
Full Name	Relationship
Company	Phone
Address	
Full Name	Relationship
Company	Phone
Address	

OTHER PERTINENT INFORMATION:

Are there any other pertinent facts you would voluntarily like to present to us which, in your opinion, may help us to evaluate your qualifications for the job you are seeking? If so, please list these facts in the space provided below. Include pertinent experience, additional course work not previously listed or special interests.

DISCLAIMER AND SIGNATURE

In addition to this application, it is the applicant's responsibility to have the following information and materials forwarded to the District upon request to complete the employment process: resume, copy of Ohio certification/license, transcripts and BCII/FBI reports.

By filling in my name below, I HEREBY CERTIFY that all statements made hereon are true and correct to the best of my knowledge, and I authorize the investigation of all statements herein recorded. I release from all liability persons and organizations reporting information required by this application. I understand that any omission, falsely answered statements made by me on this application or any supplement to it will be sufficient grounds for failure to employ or for my discharge should I become employed by the school district. I hereby grant the District permission to check, search or copy the records of any local, state, or federal law enforcement or police agency regarding traffic and/or criminal law violations, if any. I fully and completely release the District and any said agency from any liability whatsoever and waive any claims known regarding the release of information or records regarding any law violations.

Signature	Date
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