

**CLASSIFIED APPLICATION FOR EMPLOYMENT**

**North Central Ohio Educational Service Center**

Tiffin Campus • 928 West Market St., Suite. A • Tiffin, OH 44883

Marion Campus • 333 East Center Street • Marion, OH 43302

Mansfield Campus • 1495 West Longview Avenue • Mansfield, OH 44906



**APPLICATION PROCEDURE**

1. Please complete this application and return to:  
**Dr. Jim Lahoski, Superintendent**  
**North Central Ohio Educational Service Center**  
**928 W. Market St., Suite A**  
**Tiffin, OH 44883**
  
2. Please enclose a copy of the following:
  - Completed and signed application form.
  - Copy of current license/certificate or evidence that one is available (if applicable).
  - Up-to-date resume with listed references and contact information.
  - University placement file and/or transcripts of credits (if applicable)
  - Any information or material you believe to be relevant to your qualifications for the position.
  
3. After review of the completed application and materials received, interviews will be arranged by invitation only.

**DEMOGRAPHIC INFORMATION:**

Name: _____	Home Phone: _____
Permanent Address: _____	Email: _____
City: _____ State: _____ Zip: _____	Work Phone: _____
Number of months in military? _____	
Have you ever been dismissed or asked to resign from any position? If yes, please explain on the reverse side.	Yes _____ No _____
Have you ever been convicted of a felony?	Yes _____ No _____
Do you have a valid Ohio Drivers' License?	Yes _____ No _____

**FOR WHAT POSITION(S) ARE YOU APPLYING? PLEASE CHECK BELOW:**

<input type="checkbox"/> Paraprofessional	<input type="checkbox"/> Substitute Paraprofessional
<input type="checkbox"/> Secretary / Receptionist	<input type="checkbox"/> Sub secretary / Receptionist
<input type="checkbox"/> Technology	<input type="checkbox"/> Other (please list)

**EDUCATIONAL PREPARATION:**

Name of School and Location	Sem Hrs.	Degree	Major - Minor
H.S.			
Other			
Special			
Special			

**LIST ALL OHIO LICENSES/CERTIFICATES THAT YOU CURRENTLY POSSESS OR FOR WHICH YOU HAVE APPLIED:**

Type: (License, Paraprofessional license)	Subject Area(s)	Expiration Date

Are you under contract for next year? Yes \_\_\_\_\_ No \_\_\_\_\_

If "yes", with whom? Name and Address \_\_\_\_\_

If "yes", what is your current base salary? \_\_\_\_\_

If "no", have you been suspended from your job due to reduction in force, plant closing or other similar circumstance? Yes \_\_\_\_\_ No \_\_\_\_\_

**WORK EXPERIENCE:**

Name and Address of Entity	Inclusive Dates	# of Months	Position	Principal/supervisor

**REFERENCES:**

Give the names, addresses, and phone numbers of at least five people who are familiar with your professional ability, personality and character. If you have previous work experience in education, you must include the superintendents and principals with whom you have worked.

Name	Address	Phone Number	Position
Does NCOESC or its agents have your permission to contact the above named persons?			_____ Yes _____ No
Does NCOESC or its agents have your permission to contact your current employer?			_____ Yes _____ No

**BIOGRAPHICAL SKETCH:**

In your own handwriting, please write a short autobiography in the space below. Include any experience or talent which will, in your estimation, contribute to your success in the position for which you are making application.

*I certify that the information given in this application is true to the best of my knowledge. I authorize the North Central Ohio Educational Service Center and its designee(s) to conduct an appropriate reference check which may include former employer(s) for verification of my employment history, the Federal bureau of Investigation (FBI) and the Bureau of Criminal Identification and Investigation (BCII) for a background check and I hereby consent to such inquiries. I further certify that I have not been convicted of a felony or sex-related offense, and hereby authorize NCOESC to perform such background investigations as required by law. The fee for the background investigation is to be paid by the applicant who is the finalist for the position. Failure to comply will result in the disqualification of the applicant for employment consideration.*

*I understand and agree that if I am employed prior to the receipt of the FBI and BCII reports and verification of my work experience, my continued employment will be contingent upon: 1) satisfactory work experience as verified by contacts with my former employers; and 2) receipt of a report demonstrating that I am in compliance with NCOESC Board of Governors rules and regulations regarding applicant/employee criminal records and disclosures of criminal convictions.*

*I promise that the information contained in this application and in my resume is true and complete, and I understand that if it is not, I may be eliminated from consideration for this job. If, after being hired, falsehoods or omissions are discovered in my application or resume, I understand that my employment may be terminated. By affixing my signature, I agree to the conditions listed on this application and will, if employed, tender my resignation of employment should I fail to fulfill these conditions.*

\_\_\_\_\_ Date \_\_\_\_\_ Signature of Applicant

**FOR OFFICE USE ONLY**

RECEIPT OF APPLICATION (DATE AND TIME):	DATE OF INTERVIEW:	INTERVIEWED BY:	DATE OF EMPLOYMENT:

**The North Central Ohio Educational Service Center is an Equal Opportunity Employer. The NCOESC does not discriminate on the basis of race, color, national origin, religion, sex, handicap, or age in its educational programs, activities, and employment practices.**