



NORTH CENTRAL OHIO EDUCATIONAL SERVICE CENTER  
928 W MARKET STREET, SUITE A  
TIFFIN, OHIO 44883

NAME \_\_\_\_\_

CITY OF RESIDENCE \_\_\_\_\_

WORK SITE \_\_\_\_\_  
(Please indicate the school/office building you are working in)

\_\_\_\_\_ **YES, I do** reside WITHIN THE CITY LIMITS

\_\_\_\_\_ **NO, I do not** reside WITHIN THE CITY LIMITS

DATE \_\_\_\_\_ SIGNATURE \_\_\_\_\_