



**15181 STATE ROUTE 58
OBERLIN, OH 44074
440-774-1051 440-986-6601**

CERTIFIED STAFF APPLICATION

“The Lorain County JVS Board of Education and its staff are dedicated to providing equal educational opportunities and equal employment opportunities without regard to gender, race, color, national origin, age, religion, disability or any other basis of unlawful discrimination.”

An Equal Opportunity Employer
(Please Print or Type)

Name: _____ Date: _____
(Last) (First) (Middle)

Present Address: _____ Phone: _____

Social Security No. _____ Email Address _____

Position(s) Applied for: _____ Date available for employment: _____

Full Time: _____ Part Time: _____ Substitute: _____

Have you been a resident of the State of Ohio for the past 5 years? Yes No

TO THE APPLICANT:

This application will be placed on file for consideration when vacancies occur. Please **DO NOT** send us your credentials or transcripts at this time. When a vacancy occurs in your teaching area, we will contact you if you are selected to come to Lorain County Joint Vocational School for a personal interview. Supporting materials will be requested at that time. Please send the following information to the attention of Margaret Michener.

ONLY THE FOLLOWING INFORMATION IS DESIRED AT THIS TIME:

1. THIS COMPLETED APPLICATION
2. RESUME AND COVER LETTER
3. COVER LETTER
4. THREE LETTERS OF RECOMMENDATION

This application will be kept on file for a period of two (2) years.

EDUCATION: Please list College/University/High School

Name of School	Location	Dates Attended	Graduation Date	Degree or Course of Study	Semester Hours/GPA

CERTIFICATE(S)/LICENSE(S) HELD: Please attach a copy of each certificate / license.

Area of Certification	State	Certificate/License Number	Type	Expiration Date

TEACHING EXPERIENCE: Please list most recent first. (Include student teaching if applicable)

District	School	Grade/Subject	Dates	Years	Principal

Have you ever been convicted of, found guilty of, or pled to a felony and/or any misdemeanor other than traffic offenses? _____ Yes _____ No

If Yes, explain: _____

OTHER WORK EXPERIENCE:

Name of firm, institution, or organization	Address	Dates	Position

Experience with training/presenting other than teaching _____

REFERENCES: Please list names, addresses and phone numbers of at least three individuals who can attest to your character and to your effectiveness and professional ability as they relate to the position for which you are applying. Experienced teachers include superintendents, principals and supervisors with whom you have worked or are now working. For beginning teachers list building principal, cooperating teacher and/or supervising teacher. Do not duplicate references used in your credential file.

Name	Address	Phone	Position

I represent that all information furnished in connection with this application is true and accurate to the best of my knowledge. I further recognize that, should the employer discover that I have falsified any such information, I will not be hired, or if already hired, will be subject to termination from employment on that ground. Furthermore, it is understood that this application becomes the property of the Board of Education, which reserves the right to accept or reject it.

I acknowledge being informed that as a precondition to employment in the position for which I am applying, I must in accordance with Ohio law provide a set of fingerprints and satisfactorily pass a criminal records check if I come under final consideration for employment.

Date

Signature of Applicant

Please Note: We will not interview every applicant who submits an application for employment.