

Oak Hill Union Local School District 205 Western Avenue Oak Hill, Ohio 45656 Phone: (740) 682-7595

TEACHER APPLICATION FORM

Date of Application:		Date of Birth:	
Name:		Social Security No.:	
Current Address:			
Phone:	Cell Phone:	Email:	
Position Desired:			
Are you 18 years of age or c	lder? 🗆 Yes 🛛 No	Are you legally able to work in the US? Yes No	

EDUCATION:

High School, Trade, Business or Technical School, or College	Graduation Date	Diploma/Degree/Status Concentrated Area

Extracurricular activities you can direct:

CERTIFICATION:

	Certificate/License Held:	Date of Ex	piration:	
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EMPLOYMENT HISTORY:

Name and address of Employer	Work Assignment	Reason for Leaving	Employment Dates

STUDENT TEACHING:

Teacher: ______ School: ______

PROFESSIONAL REFERENCES:

Name	Address	Phone	Position

I understand that any information provided by me that is found to be false, incomplete or misrepresented in any respect, will be sufficient cause to: a) cancel further consideration of this application, b) rescind an offer that has been made, or if I am employed, c) immediately discharge me from continued employment, waive any rights under Chapter 3319 of the Ohio Revised Code regardless of when the discovery is made and regardless of my work performance. All employees are required to have a current BCI/FBI fingerprinting/background report on file. Certain criminal convictions will/may disqualify you from employment in some or all positions.

Signature of Applicant

The Oak Hill Union Local School District ensures equal educational opportunities regardless of race, color, creed, national origin, handicap, or sex (including sexual orientation and gender identity) in compliance with state directives and federal recommendations.

It is the policy of the Oak Hill Union Local School District not to discriminate on the basis of sex (including sexual orientation and gender identity) in its educational programs, activities or employment policies as required by Title IX of the 1972 Educational Amendments. Inquiries regarding compliance with Title IX may be directed to: Randall Layton, Principal <u>OR</u> Director of the Office of Civil Rights 5063 St. Rt. 93 Dept. of Health, Education and Welfare Oak Hill, Ohio 45656 Washington, D.C. 20000-20525 740-682-7055

OFFICE USE ONLY: Date Received:

By Whom: