**MISSISSINAWA VALLEY LOCAL SCHOOLS**

**1469 St. Rt. 47**

**Union City, Ohio 45390**

**Mr. Jeffrey Winchester, Superintendent**  **Phone: 937-968-5656**

#### **Fax: 937-968-6731**



NON-TEACHING APPLICATION

(Classified)

***Mississinawa Valley Local School District is an equal opportunity employer and does not discriminate against applicants or employees on the basis of sex, race, color, religion, national origin, ancestry, citizenship, or age (40 years of age and over). In addition, Mississinawa Valley Local School District does not discriminate against qualified individuals with disabilities or veterans.***



***If hired, proof of your identity and employment eligibility in the United States must be established by appropriate documentation at the time you begin work with Mississinawa Valley Local School District.***



***This application will be kept in an active status for 60 days. During that time, you will be considered for open positions for which you are qualified. After that period, you will have to resubmit an application if you remain interested in employment with Mississinawa Valley Local School District.***



***Unless otherwise noted, all employment with Mississinawa Valley Local School District is at-will employment.***



### **Personal Data**

1. Name Social Security Number

2. Address

Street/Road City State Zip code

3. Telephone Number ( ) (Business)

Area Code

4. Position(s) Applying For: BUS DRIVER

5. Date available to start:

6. Are you over 18 years of age?

7. Have you ever been convicted of a violation of the law other than a minor traffic violation? If yes, please explain.

8. Have you applied to work with us before? If yes, when?

9. Are you willing to work an irregular schedule, overtime, and on weekends when necessary for Mississinawa Valley Local School District? If no, please explain.

10. Are you willing to work any shift? If no, please explain.

Shift preference?

11. Do you have a valid driver’s license? Driver’s License No.

State Expiration Date

1. Do you have access to adequate transportation to travel to and from work?

If no, please explain

# **Educational Background**

Number

Name and of Years Did You

Address Completed Graduate Major



High School

College

Other (specify)

# **U.S. Military Service**

Branch Highest Rank Achieved

Dates of Service

Duties

**Employment History** - (current/most recent employment first)

1. Employer’s Name & Address

Dates to Supervisor(s)

Position(s) held Wage/Salary to

Reason for Leaving

Your duties

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**Other Experience or Qualifications** (space can be used to elaborate on duties associated with positions listed above or to list other skills)

**References** (Do not list relatives or previous employers.)

Name Address & Phone Occupation Years Known

1.

2.

3.

**Certification and Authorization – Please read thoughtfully**

I certify that all facts contained in the application are true and complete, I authorize Mississinawa Valley Local School District to verify the accuracy of the information provided herein, I authorize former employers and educational institutions to provide information concerning me, and I release them from liability for providing any such information to Mississinawa Valley Local School District. I further authorize Mississinawa Valley Local School District to provide to others information concerning me, and I release Mississinawa Valley Local School District from liability for providing any such information.

I understand that falsification, misrepresentation, or omission of requested facts will result in denial of employment or, if employed, will result in immediate dismissal. I understand and agree that, if hired, unless otherwise noted, my employment will be for no definite period and may, regardless of the date of payment of wages, be terminated at any time without previous notice and with or without reason, at the will of either myself or Mississinawa Valley Local School District. I also understand and agree that no one has authority to promise me job security or continued employment, except by contract signed by the board president, the treasurer and myself.

Signature of Applicant Date

Return to:

MR. JEFFREY WINCHESTER,

SUPERINTENDENT

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