

**PUTNAM COUNTY EDUCATIONAL SERVICE CENTER  
124 Putnam Parkway  
Ottawa, Ohio 45875  
(419) 523-5951**

**APPLICATION FOR ADMINISTRATOR**

**NOTE: A current resume should be included with this application.**

APPLICANT'S NAME \_\_\_\_\_

POSITION DESIRED \_\_\_\_\_

PERMANENT ADDRESS \_\_\_\_\_

PHONE \_\_\_\_\_ EMAIL \_\_\_\_\_

**PERSONAL DATA**

**1. Certificate/license(s) held**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**2. Military Service: (From/To)** \_\_\_\_\_

**3. List of Awards/Honors** or any additional information that you would like to call to the screening committee's attention

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

The Putnam County Educational Service Center is an Equal Opportunity Employer and as such, is consistent with applicable federal and Ohio law and does not discriminate on the basis of race, color, national origin, disability, age, gender, religion, military status, ancestry.

**ANY PERSON WHO KNOWINGLY MAKES A FALSE STATEMENT IS GUILTY OF FALSIFICATION UNDER SECTION 2921.13 OF THE REVISED CODE, WHICH IS A MISDEMEANOR OF THE FIRST DEGREE.**

(9-2021)

**COLLEGE EDUCATION**

**1. Name of University and Location** \_\_\_\_\_

Degree Earned and Date Awarded \_\_\_\_\_

Major/Minor \_\_\_\_\_ Total Hours \_\_\_\_\_  
(semester/quarter hours)

**2. Name of University and Location** \_\_\_\_\_

Degree Earned and Date Awarded \_\_\_\_\_

Major/Minor \_\_\_\_\_ Total Hours \_\_\_\_\_  
(semester/quarter hours)

**3. Name of University and Location** \_\_\_\_\_

Degree Earned and Date Awarded \_\_\_\_\_

Major/Minor \_\_\_\_\_ Total Hours \_\_\_\_\_  
(semester/quarter hours)

**RECENT EMPLOYMENT EXPERIENCE** (List most recent first)

**1. Name of Employer** \_\_\_\_\_

Location \_\_\_\_\_

Dates Employed \_\_\_\_\_

Position \_\_\_\_\_

**2. Name of Employer** \_\_\_\_\_

Location \_\_\_\_\_

Dates Employed \_\_\_\_\_

Position \_\_\_\_\_

**3. Name of Employer** \_\_\_\_\_

Location \_\_\_\_\_

Dates Employed \_\_\_\_\_

Position \_\_\_\_\_

**REFERENCES:** Persons knowledgeable of your qualifications for this position. Include especially administrators under whom you have worked.

1. Name \_\_\_\_\_

Position \_\_\_\_\_

Telephone No. \_\_\_\_\_ No. of Years Known \_\_\_\_\_

2. Name \_\_\_\_\_

Position \_\_\_\_\_

Telephone No. \_\_\_\_\_ No. of Years Known \_\_\_\_\_

3. Name \_\_\_\_\_

Position \_\_\_\_\_

Telephone No. \_\_\_\_\_ No. of Years Known \_\_\_\_\_

**PHILOSOPHY OF EDUCATION:** In your own words and handwriting, briefly tell how you will be able to assist us to continue our growth of excellence in education.

**Pre-Employment Information:**

I understand that:

1. The Putnam County Educational Service Center will exercise due diligence to check the background information supplied by an applicant to assure the accuracy of the data furnished and the candidate's past performance record.
2. I authorize the Putnam County Educational Service Center to make such investigations and inquiries of my employment and listed references as may be necessary in arriving at its employment decision.
3. I understand that any offer of employment is conditional upon the Putnam County Educational Service Center receiving a satisfactory record check from the Ohio Bureau of Criminal Investigation (BCI) and the Federal Bureau of Investigation (FBI). I understand that if the criminal record check is not satisfactory, the ESC Governing Board will not be permitted by state law to employ me.
4. I certify that all the information that I have provided to the Putnam County Educational Service Center is complete and accurate and submitted with the knowing intent that the ESC Governing Board will rely on this information to make its employment decisions. I understand that should the employer discover that I have falsified any such information, I will not be hired. If already hired, I will be subject to termination from employment on that ground.

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Applicant's Signature

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Date