

**APPLICATION FOR EMPLOYMENT
CERTIFIED/LICENSE STAFF
HILLSBORO CITY SCHOOLS
HILLSBORO CITY SCHOOLS IS AN EQUAL OPPORTUNITY EMPLOYER**

Date of Application

Last Name

First Name

Middle

Other Names under which transcripts, certificates, former applications may be listed

Address (Number and Street, City, State and Zip code)

Home Phone Number

Cell Phone

E-mail Address

******* PLEASE ATTACH A COPY OF LICENSE**

EMPLOYMENT DESIRED

Circle preferences:

ELEMENTARY *K 1 2 3 4 5* _____ *6 7 8* _____ *9 10 11 12*
MIDDLE *HIGH*

☐ *Special* _____

☐ *Area*
Administration

Subjects in order in preference: _____

EDUCATION

<i>Name of University/College</i>	<i>Date</i>	<i>Degree Received</i>	<i>Majors Semester hours</i>	<i>Quarter Hours</i>

CERTIFICATION/ LICENSURE

<i>Teaching/License Area</i>	<i>Grade Level/Range</i>	<i>Prov. Prof. or Permanent License</i>	<i>Expires</i>	<i>State</i>

OTHER INFORMATION

Are you presently under contract to any Board of Education? ☐ or ☐ Expiration date: _____

If yes, indicate employer: _____ Type of contract: _____

Have you attained tenure/continuing education contract status in any school district? ☐ or ☐

If yes, indicate the school district, state and the date you were awarded a continuing contract: _____

Are you legally eligible to work in the United States? ☐ or ☐
 (*Proof of U.S. Citizenship will be required prior to employment. Immigration Reform and Control ACT of 1986. *)

Have you served in the armed forces of the United States? ☐ or ☐ Branch _____

Active Duty from _____ to _____ Rank when separated from active service _____

TEACHING EXPERIENCE

List all teaching experience including student teaching beginning with most recent. Attach page if needed.

<i>School Year</i>	<i>Beginning Mo/Yr.</i>	<i>Ending Mo/Yr.</i>	<i>Name of School</i>	<i>Address</i>	<i>Reason for leaving</i>

PROFESSIONAL REFERENCES

List names of professional educators capable of judging your teaching competence or potential. Beginning teachers must include cooperating teacher or university supervisor for students teaching experience. Experienced teachers must include administrators with whom you have worked.

<i>Full name of Reference</i>	<i>Position/Responsibility</i>	<i>Complete Address</i>	<i>Phone Number</i>

NON-TEACHING WORK EXPERIENCE

<i>Name of Employer</i>	<i>Complete Address</i>	<i>Beginning Mo/Yr.</i>	<i>Ending Mo/Yr.</i>	<i>Type of work</i>

SPECIAL INFORMATION

Check any of the following activities that you are qualified to coach or direct. Use a double check to show actual coaching or directing experience. Give additional information if you desire.

☐ Baseball	☐ Basketball	☐ Cheerleading	☐ Chorus
☐ Class Sponsor	☐ Cross Country	☐ Debate	☐ Drama
☐ Drill Team	☐ Football	☐ Golf	☐ Gymnastics
☐ Marching Band	☐ Newspaper	☐ Soccer	☐ Softball
☐ Student Council	☐ Swimming	☐ Tennis	☐ Track
☐ Volleyball	☐ Wrestling	☐ Yearbook	

Clubs: _____

Other: _____

REFERENCES FOR COACHING AND OTHER EXTRA CURRICULAR ACTIVITIES

<i>Name of Reference</i>	<i>Position</i>	<i>Employer/Sponsor/Organization</i>	<i>Number of years</i>

DISCLOSURE STATEMENT

I certify that all the statements made by e in this application are true, complete to the best of my knowledge. I also certify that I have not been convicted of any felony. I am aware that any false statements will be sufficient cause for dismissal from any position I may hold for the Hillsboro City School District.

I understand that the Board of Education may want to verify the statements I have made in this application. I hereby give my permission for the Hillsboro City School District or its authorized representatives, either at this time or at any time during my employment with the board to make inquiries of past employers and other persons and entities, whether listed among my references or not, for the purpose of determining my qualifications and fitness for the position. I further give my permission for the district to request and review any of my medical records, employment records and police records from any local state, or federal agency keeping such records.

I agree to complete the required criminal background check and provide the results to the district. I understand that if the report from the Ohio Bureau of Criminal Identification and Investigation and the Federal Bureau of Investigation is not received prior to my hiring, my contract of employment is conditioned upon those results being satisfactory to the Board of Education.

I understand that the completion of this document is required for further consideration of my application.

“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.”

Signature of Applicant

Date

APPLICATION PROCESS

****Include the following with your application:**

- *Copy of College Transcripts*
- *Completed application with signature*
- *Copy of certificates/licenses you have*
- *Resume*
- *Candidate's statement*
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****Once a candidate is considered a finalist for the position, the following is required.**

- *Official Transcripts*
- *Completed background check from the Bureau of Criminal Identification and Investigation*
- *Completed background check from the Federal Bureau of Investigations*

****Submit by mail to: Diane Michael, Hillsboro City Schools, 39 Willettesville Pike, Hillsboro, OH 45133**

****Submit by e-mail: DMICHAEL@hcs-k12.org**

****Watch for postings on our district website at: www.hcs-k12.org**

Revised 1/2022