

East Liverpool City Schools

APPLICATION FOR EMPLOYMENT

We consider applications for all positions without regard to race, color, religion, creed, gender, national origin, age, disability, sexual orientation, citizenship status, genetic information or any other legally protected status.

East Liverpool City Schools District

Superintendent Office

810 West 8th Street

East Liverpool, Ohio 43920

www.elpotters.school

330-385-7132

We are an equal opportunity employer.

** Indicates required question*

1. Email *

2. Date *

Example: January 7, 2019

3. **How did you learn about this position? ***

Check all that apply.

- Indeed or another employment website
- Social media
- Advertisement
- Friend
- Relative
- Employment Agency
- Other

4. **Please attach your resume (if you wish to do so) and/or any additional information you may be helpful regarding your employment.**

Files submitted:

5. **Name (First, Middle, Last. Suffix) ***

6. **Other name under which transcripts, certificates, and former applications may be listed:**

7. **Address (Street, City, State, Zip) ***

8. **Cell phone ***

9. **Social Security Number ***

10. **How long have you lived at your present address? ***

11. **Have you ever worked for East Liverpool City Schools? ***

Mark only one oval.

Yes

No

12. **If yes, why was your employment discontinued?**

13. **Highest grade completed in school? ***

Check all that apply.

High School

Undergraduate College

Graduate School

Trade School

Military

Other

14. **Email ***

15. **Please indicate the type of position (s) you desire: ***

Check all that apply.

- Bus Driver (licensed)
- Paraprofessional/Teacher's Aide (licensed)
- Seasonal (Non-licensed)
- Food Services (Non-licensed)
- Bus Aide (Non-licensed)
- Crossing Guard (Non-licensed)
- Custodian (Non-licensed)
- Secretary (Non-licensed)

16. **Will you work as a substitute? ***

Check all that apply.

- Yes
- No

17. **Are you available to work: ***

Check all that apply.

- Full time
- Part time
- Temporary

18. **Please indicate which locations you prefer to work in, although you may be needed in any location:** *

Check all that apply.

- LaCroit Elementary
- Westgate Middle School/Preschool
- North Elementary
- Bus Garage
- ELJH/ELHS
- Administration Building

19. **Previous Employment Record (from current/most recent) ***

Employer Name #1

20. **May we contact your previous employer? ***

Mark only one oval.

- Yes
- No

21. **Employer Address ***

22. Dates of employment *

23. Work performed *

24. Hourly rate/salary *

25. Reason you left employment *

26. **Employer Name #2**

27. Employer Address

28. Dates of employment

29. Reason you left employment

30. **Employer Name #3**

31. Employee address

32. Dates of employment

33. Reason you left employment

34. Type of work done

35. **Special Licenses (i.e. CDL, Boilers, Paraprofessional)**

36. **License Number**

37. **License Expiration Date ***

Example: January 7, 2019

38. **Please upload copy of this license/certificate to this application**

Files submitted:

39. **Reference #1 ***

40. **Reference #1 Address ***

41. **Reference #1 Phone Number ***

42. **Reference #1 Relationship to Applicant ***

43. **Reference #2 Name ***

44. **Reference #2 Address ***

45. **Reference #2 Phone Number ***

46. **Reference #2 Relationship to Applicant ***

47. **Reference #3 Name ***

48. **Reference #3 Address ***

49. **Reference #3 Phone ***

50. **Reference #3 Relationship to Applicant ***

51. **May we contact your above references? ***

Mark only one oval.

Yes

No

52. **I authorize the verification of all references and information contained in this application to be true ***

Mark only one oval.

Yes

No

53. I hereby authorize a review of and full disclosure of all records concerning myself at any duty authorized agent of the East Liverpool City Schools, whether the said records are of a public, private or confidential nature. *

The intent of this authorization is to give my consent for full and complete disclosure of the records of education institutions: medical and psychiatric treatment and/or consultation, including hospitals, clinics, private practitioners, and the US Veteran's Administration; employment and preemployment records, including background reports, polygraph reports and charts, efficiency ratings, complaints or grievances filed by or against me; and the records and recollections of attorneys at law, or of others counsels, whether representing me or another person in any case, either criminal or civil, in which I presently have or have had an interest.

I understand that any information obtained by a personal history background investigation which is developed directly or indirectly, in whole or in part, upon employment by the East Liverpool City Schools District. I also certify that any person (s) who may furnish such information concerning me shall not be held accountable for giving this information; and I do hereby release said person (s) from any and all liability which may be incurred as a result of furnishing such information.

A photocopy of this release form will be as valid as an original thereof, even though the said photocopy does not contain original writing of my signature.

Mark only one oval.

Yes

No

54. **Background Check**

Pursuant to East Liverpool Board of Education Policy #4121, all applications for employment by the East Liverpool City Schools shall undergo a criminal background check at the applicant's expense.

Prospective employees need to complete this page of the application, and have set of fingerprints forwarded to the Ohio Department of Education AND our school district.

I certify that all of the information on my application is complete and accurate, and is submitted with the intent that the Board of Education will rely on this information in making its employment decisions. I understand that any misrepresentation or falsification of these application materials will result in my removal from consideration for employment with the East Liverpool City Schools. My signature also provides automatic authorization for a criminal background check through the Ohio Bureau of Investigation. I further agree to reimburse East Liverpool City Schools for any costs incurred as a result of a background check.

Mark only one oval.

Yes

No



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