



MID-OHIO EDUCATIONAL SERVICE CENTER

Substitute Teacher Application

2025-2026

PLEASE PRINT CLEARLY

Name: _____ Date: _____
Address: _____ City: _____ State: _____ Zip: _____
Date of Birth: _____ Contact Phone #: _____
Email: _____

Highest Level of Education: Master's Bachelor's Associate's High School Other _____

If you are a degreed and certified teacher, are you interested in tutoring? Yes

— AN ADDITIONAL APPLICATION MAY BE REQUIRED BY DISTRICTS. PLEASE CONTACT THE DISTRICT. —

Select the school district(s) in which you would like to substitute.

Ashland County: **Hillsdale

Crawford County: *Buckeye Central **Bucyrus **Colonel Crawford

**Crestline *Galion *Wynford

Morrow County: **Highland **Mount Gilead **Northmor

Richland County: *Clear Fork *Crestview *Lexington

*Lucas *Madison *Pioneer CTC *Plymouth-Shiloh

Community/Non-Public: **Cypress High School Foundation Academy

*Mansfield Christian School Richland School of Academic Arts

*St. Peter's School

Alternative Schools: *Abraxas *F.I.R.S.T. LEAP

*ACCEPTS HIGH SCHOOL DIPLOMA OR GED AS MINIMUM; REQUIRES INTERVIEW WITH SCHOOL

**ACCEPTS ASSOCIATE'S DEGREE AS MINIMUM; NO REQUIRED INTERVIEW, BUT MUST PROVIDE OFFICIAL TRANSCRIPT

I understand that falsification of any and all information on this application shall result in my being disqualified as a substitute teacher. By affixing my signature on this application, I agree to all the conditions listed in the substitute teacher packet.

Substitute teachers may be discharged for any reason without recourse to the grievance procedure. Substitute teachers may also be removed from the substitute call list at the discretion of each individual school district.

~Mid-Ohio Educational Service Center is an
Equal Opportunity Employer ~

Applicant Signature _____

Date _____

Please return this application to Mid-Ohio ESC. There is **no** application fee for the 2025-2026 year.

890 West Fourth Street, Suite 100, Mansfield, Ohio 44906 Phone: 419-774-5520 Fax: 419-774-5523 www.moesc.net

OFFICE USE ONLY

Date Received _____ ODE Licensure BCI/FBI 2024-2025 Returning Sub