

Position	Employer	Current Mailing Address	Dates of Employment

Teaching Experience in Years: _____

Do you currently hold a contract? _____

If you are an experienced teacher, how many days of accumulated sick leave do you have to your credit?

Professional References: (List correct names, positions, phone numbers, & complete addresses)

1. _____

2. _____

3. _____

Personal References: (List correct names, phone numbers, & complete addresses)

1. _____

2. _____

Extra-curricular activities and honors received:

High School: _____

College: _____

What sports and/or activities could you coach or sponsor after school hours?

When will you be available to start:_____

Please submit copies of transcripts and licenses with your application. Resumes are also appreciated.

PLEASE ANSWER THE FOLLOWING QUESTIONS IN YOUR OWN HANDWRITING.

Are there any other experiences, skills, or qualifications that you feel would be beneficial in your work with our school district?

Why do you want to teach for Bellefontaine City Schools?

I certify that to the best of my knowledge, the foregoing information in this application is correct.

Signature:_____

AN EQUAL OPPORTUNITY EMPLOYER

The Bellefontaine City School District provides opportunities for employment, retention and advancement for all people regardless of race, color, creed, national origin, political affiliation, age, sex, or handicapping condition.

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BELLEFONTAINE CITY SCHOOLS



“Equal Access To A Quality Education”