

STRUTHERS CITY SCHOOLS
99 EUCLID AVENUE - STRUTHERS, OH 44471
330-750-1061 330-750-5516 (fax)
APPLICATION FOR EMPLOYMENT
(AN EQUAL OPPORTUNITY EMPLOYER)

PERSONAL INFORMATION

DATE _____

NAME _____
LAST FIRST MI

ADDRESS _____
STREET CITY STATE ZIP

PHONE NO. _____ ARE YOU 18 YEARS OF AGE OR OLDER? ☐ YES ☐ NO

EMAIL ADDRESS _____

EMPLOYMENT DESIRED:

☐ **PERMANENT**

☐ **SUBSTITUTE**

BUS DRIVER ☐ CAFÉ TECH ☐ [please submit a physical] CROSSING GUARD ☐ CUSTODIAN ☐

HEALTH PROFESSIONAL ☐ JAN TECH ☐ PARAPROFESSIONAL/AIDE ☐ SECRETARY ☐

ARE YOU CURRENTLY EMPLOYED? ☐ YES ☐ NO IF SO, MAY WE CONTACT YOUR EMPLOYER? ☐ YES ☐ NO

HAVE YOU EVER APPLIED TO THIS SCHOOL SYSTEM BEFORE? ☐ YES ☐ NO YEAR? _____

EDUCATION

	NAME & LOCATION OF SCHOOL ATTENDED	NO. OF YEARS ATTENDED	DEGREE OBTAINED	SUBJECTS STUDIED
HIGH SCHOOL				
COLLEGE/ UNIVERSITY				
OTHER				

U.S. MILITARY SERVICE

_____ Are you presently in the National Guard or Reserves? ☐ YES ☐ NO
BRANCH RANK

THE FOLLOWING IS REQUIRED TO BE CONSIDERED FOR EMPLOYMENT OR ADDED TO THE SUB LIST:

- **ALL APPLICANTS MUST SUBMIT A CERTIFIED BCI/FBI CHECK (CURRENT WITHIN 1 YEAR) WITH YOUR APPLICATION.**
- **APPLICANTS FOR BUS DRIVER MUST SUBMIT A CURRENT CDL, T8 PHYSICAL, ABSTRACT FROM THE BMV, CURRENT PRE-SERVICE CERTIFICATE, OBI PRE-TRIP EVALUATION, AND OBI DRIVING EVALUATION.**
- **APPLICANTS FOR CAFETERIA POSITIONS MUST SUBMIT PROOF OF A CURRENT PHYSICAL EXAM.**

(see other side)

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EMPLOYMENT HISTORY (List below your last four employers, starting with the most recent one first)

BEG/END DATE	EMPLOYER	ADDRESS	SALARY	POSITION	REASON FOR LEAVING

REFERENCES

NAME	ADDRESS	PHONE	BUSINESS	YEARS ACQUAINTED

IN CASE OF EMERGENCY NOTIFY:

NAME

ADDRESS

PHONE NO.

"I CERTIFY THAT THE FACTS CONTAINED IN THIS APPLICATION ARE TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE AND I UNDERSTAND THAT IF EMPLOYED, FALSIFIED STATEMENTS ON THIS APPLICATION IS GUILTY OF FALSIFICATION, A FIRST-DEGREE MISDEMEANOR. R.C. 3319.393(A)."

"I AUTHORIZE INVESTIGATION OF ALL STATEMENTS CONTAINED HEREIN AND THE REFERENCES LISTED ABOVE TO GIVE YOU ANY AND ALL INFORMATION CONCERNING MY PREVIOUS EMPLOYMENT AND ANY PERTINENT INFORMATION THEY MAY HAVE PERSONAL OR OTHERWISE, AND RELEASE ALL PARTIES FROM ALL LIABILITY FOR ANY DAMAGE THAT MY RESULT FROM FURNISHING SAME TO YOU."

READ CAREFULLY BEFORE SIGNING:

"I AGREE THAT ANY CLAIM OR LAWSUIT RELATING TO MY SERVICE WITH THE STRUTHERS CITY SCHOOL DISTRICT, STRUTHERS BOARD OF EDUCATION OR ANY OF ITS SUBSIDIARIES MUST BE FILED NO MORE THAN SIX (6) MONTHS AFTER THE DATE OF THE EMPLOYMENT ACTION THAT IS THE SUBJECT OF THE CLAIM OR LAWSUIT. I WAIVE ANY STATUTE OF LIMITATIONS TO THE CONTRARY."

SIGNATURE: _____ DATE _____

POSITIONS ARE AVAILABLE TO EVERYONE WITHOUT REGARD TO RACE,
COLOR, NATIONAL ORIGIN, RELIGION, AGE, SEX, OR HANDICAP.