

ONTARIO LOCAL BOARD OF EDUCATION

457 Shelby-Ontario Road
 Ontario, Ohio 44906
 419-747-4311
 www.ontarioschools.org

SUBSTITUTE TEACHER APPLICATION FOR EMPLOYMENT

Prospective employees will receive consideration without discrimination because of race, creed, sex, color, age, national origin or handicap.

PLEASE TYPE OR PRINT

Date of Application _____

PERSONAL INFORMATION

Last Name	First Name	Middle Initial
Current Address: (Street, City, State, Zip Code)		Telephone Number:
Previous (Temporary) Address: (Street, City, State, Zip Code)		Cell Phone Number:

EDUCATION

NAME AND LOCATION OF SCHOOL List High School and College(s) / University(s)	MAJOR	MINOR	NUMBER OF SEMESTER HOURS

List the number of *SEMESTER* hours for each:

Undergraduate degree _____

Were you certified to teach at the completion of your undergraduate degree? Yes _____ NO _____

Additional hours earned past issuance of certification, if you do not have a masters' degree _____

Hours beyond masters' degree _____

CERTIFICATION

List each area of certification currently held and certificate expiration date: _____

If previously employed in a school, under what type of contract were you employed? _____

Indicate, in order of preference, the subjects or grades you are certified to teach: _____

Position applying for: Elementary _____ Middle School _____ High School _____ Other _____

- A PERSONAL RESUME MAY BE ATTACHED TO THIS APPLICATION FORM WITH ANY OTHER INFORMATION YOU FEEL MAY FURTHER YOUR APPLICATION.
- YOUR APPLICATION WILL BE ACTIVE FOR ONE YEAR FROM THE DATE OF RECEIPT. TO UPDATE YOUR APPLICATION, SUBMIT A REQUEST WITH AN UPDATED RESUME.
- ALL INITIAL CERTIFIED CONTRACTS ARE BASED UPON THE EMPLOYEE OBTAINING THE APPROPRIATE OHIO TEACHING CERTIFICATION. IF FOR SOME REASON CERTIFICATION IS DELAYED, THE TREASURER WILL COMPENSATE THE EMPLOYEE AT THE SUBSTITUTE RATE, IF SUBSTITUTE CERTIFICATION IS OBTAINED. CONTRACTED DAILY PAYMENT WILL COMMENCE ON THE DAY CERTIFICATION IS RECEIVED IN THE CENTRAL OFFICE.
- ALL APPLICATIONS FOR EMPLOYMENT ARE SUBJECT TO A CRIMINAL RECORDS CHECK THROUGH THE BUREAU OF CRIMINAL IDENTIFICATION AND INVESTIGATION PURSUANT TO THE AUTHORITY OF SECTION 3319.32 AND SECTION 109.57. REVISED CODE.
- DUE TO THE LENGTH OF TIME REQUIRED FOR COMPLETION OF THE RECORDS CHECK, IT MAY OCCASIONALLY BE NECESSARY TO EMPLOY A PERSON PRIOR TO THE BOARD OF EDUCATION HAVING RECEIVED THE RESULTS OF THE CRIMINAL RECORDS INVESTIGATION. IN THESE CASES, THE BOARD OF EDUCATION SHALL RELY ON THE APPLICANT INFORMATION PROVIDED IN THE EMPLOYMENT APPLICATION. HOWEVER, BY SIGNING THIS DOCUMENT, I SPECIFICALLY AGREE THAT IF I AM EMPLOYED BY THE BOARD OF EDUCATION PRIOR TO ITS RECEIPT OF A RESPONSE FROM B.C.I., MY EMPLOYMENT SHALL BE CONTINGENT UPON SUBSEQUENT RECEIPT BY THE BOARD OF EDUCATION OF A REPORT FROM B.C.I. WHICH IS CONSISTENT WITH MY ANSWER TO THE ABOVE QUESTION. IN THE EVENT I HAVE BEEN EMPLOYED PRIOR TO THE BOARD OF EDUCATION HAVING RECEIVED A REPORT FROM B.C.I., AND A SUBSEQUENT REPORT FROM B.C.I. IS RECEIVED WHICH IS NOT CONSISTENT WITH MY ANSWER TO THE ABOVE QUESTION, I SPECIFICALLY AGREE THAT THE ACTION OF THE BOARD OF EDUCATION EMPLOYING ME SHALL BE VOID WITHOUT FURTHER ACT BY EITHER PARTY, AND THAT MY EMPLOYMENT WILL TERMINATE IMMEDIATELY WITHOUT THE NECESSITY OF PROCEEDINGS TO FORMALLY TERMINATE MY CONTRACT OF EMPLOYMENT.

DATE _____

SIGNED _____

- THE INFORMATION PROVIDED ON THIS APPLICATION IS ACCURATE. I UNDERSTAND THAT FALSIFICATION OF ANY INFORMATION REQUESTED MAY RESULT IN MY IMMEDIATE TERMINATION.

DATE _____

SIGNED _____