

Washington-Nile Local School District
Applications for CERTIFIED Employment
15332 US Hwy 52
West Portsmouth, Ohio 45663

PROCEDURES:

1. Please complete this application and return to: Washington-Nile Local School District, 15332 US Hwy 52, West Portsmouth, Ohio 45663.
2. Please enclose a copy of the following:
 - a. Any License or Certificates that you have
 - b. An official transcript of credits
 - c. Resume and list of references
 - d. Your credentials that include at least three letters of reference
3. After review of the completed application and other materials received, interviews will be arranged (by invitation only) with selected candidates for vacant positions.

DEMOGRAPHIC INFORMATION

Name	_____		
	Last	First	Middle
Address	_____		
City	_____	State _____	Zip _____ Phone _____
State Teacher ID Number or Social Security Number	_____		

FOR WHAT POSITION(S) ARE YOU APPLYING? Please check below:

Elementary Teacher PreK-3	
Elementary Teacher 4-6	
Junior High Teacher 7-8	Subject Area _____
High School Teacher 9-12	Subject Area _____
Intervention Specialist	
Administrative	Position _____
Other	

Dates available for employment _____
Are you currently under school district contract _____

CERTIFICATION AREAS(S) (Please list certificates you presently have or those you anticipate receiving as a result of completion of studies.)

Type	Area	Grade Level

EDUCATION	SCHOOL/LOCATION	DEGREE
High School Attended		
Colleges and Universities		

TEACHING/ADMINISTRATIVE EXPERIENCE (Include student teaching experience if you have less than three years teaching experience)

Dates	School	Address	Position Grades/Subjects	Extra Duties (i.e. curriculum, tech committee)

PROFESSIONAL INVOLEMENT

Organization	Involvement (conferences, articles, leadership, positions, etc. Please include dates.)

Are you involved in any organization outside your profession? Yes No
 If yes, have you held or do you hold any leadership position? Yes No

REFERENCES (Name references including superintendents, principals, and supervisors for whom you taught or teach.)

Name	Position	Address	Phone

May we contact the above listed references? Yes _____ No _____ Initial _____

It is understood and agreed that Washington-Nile Local School District may contact former employer(s) for verification of my employment history and the Bureau of Criminal Identification and Investigation (BCI) for a background check and I hereby consent to such inquires.

I understand that if I am employed prior to the receipt of the BCI report and verification of my work experience, my continued employment will be conditioned on: 1) satisfactory work experience as verified by contacts with former employers; and 2) receipt of a report demonstrating that I am in compliance with the Board of Education rules and regulations regarding applicant/employee criminal records and disclosure of criminal convictions listed in category OTHER.

Signature

Date

I confirm the information contained in this application, resume, and other documents are true and complete. I understand that if it is not, I may be eliminated from consideration for this job. If, after being employed, falsehoods or omissions are discovered in my application, resume, or other documents, I understand that my employment may be terminated. By affixing my signature, I agree to the conditions listed on this application and will, if employed, tender my resignation of employment should I fail to fulfill these conditions.

Signature

Date

I have the legal right to work in the United States and will submit the appropriate documentation upon the time of hire.

Signature

Date

The Washington-Nile Local School District provides equal employment opportunities to all people without regard to race, color, age, creed, national origin, sex, religion, or handicapping condition.