

# OTTAWA-GLANDORF SCHOOLS

## TEACHER /ADMINISTRATOR APPLICATION

Please submit to: Ottawa-Glandorf Schools  
Personnel Office  
630 Glendale Avenue  
Ottawa, OH 45875

*An Equal Opportunity Employer*

Personal Data

Date \_\_\_\_\_

Name \_\_\_\_\_  
Last First Middle or Maiden Name

Address \_\_\_\_\_  
Street City and State Zip Code

Home Phone ( ) \_\_\_\_\_ Business Phone ( ) \_\_\_\_\_

E-mail Address \_\_\_\_\_ Position Applying For \_\_\_\_\_

Are you a citizen of the United States? Yes \_\_\_\_\_ No \_\_\_\_\_

College Education

Name of Institution and Location \_\_\_\_\_

Degree Earned and Date \_\_\_\_\_

Major/Minor \_\_\_\_\_

Name of Institution and Location \_\_\_\_\_

Degree Earned and Date \_\_\_\_\_

Major/Minor \_\_\_\_\_

Name of Institution and Location \_\_\_\_\_

Degree Earned and Date \_\_\_\_\_

Major/Minor \_\_\_\_\_

Name of Institution and Location \_\_\_\_\_

Degree Earned and Date \_\_\_\_\_

Major/Minor \_\_\_\_\_

Certification

Certificate/License Type and Subjects/Grades \_\_\_\_\_

Certificate/License Number \_\_\_\_\_

Date Issued \_\_\_\_\_ Date of Expiration \_\_\_\_\_

If certificate is pending, please indicate the expected date of issuance. \_\_\_\_\_

*Please list most recent employers.*

Experience

Name of School and Location \_\_\_\_\_

Number of Years and Dates \_\_\_\_\_

Subject/Grade Levels Taught \_\_\_\_\_

Principal/Supervisor Name and Phone Number \_\_\_\_\_

Name of School and Location \_\_\_\_\_

Number of Years and Dates \_\_\_\_\_

Subject/Grade Levels Taught \_\_\_\_\_

Principal/Supervisor Name and Phone Number \_\_\_\_\_

Name of School and Location \_\_\_\_\_

Number of Years and Dates \_\_\_\_\_

Subject/Grade Levels Taught \_\_\_\_\_

Principal/Supervisor Name and Phone Number \_\_\_\_\_

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Number of Years and Dates \_\_\_\_\_

Subject/Grade Levels Taught \_\_\_\_\_

Principal/Supervisor Name and Phone Number \_\_\_\_\_

Name of School and Location \_\_\_\_\_

Number of Years and Dates \_\_\_\_\_

Subject/Grade Levels Taught \_\_\_\_\_

Principal/Supervisor Name and Phone Number \_\_\_\_\_

References

Name and Position \_\_\_\_\_

Address \_\_\_\_\_

Phone Number ( ) \_\_\_\_\_ Number of Years Known \_\_\_\_\_

Name and Position \_\_\_\_\_

Address \_\_\_\_\_

Phone Number ( ) \_\_\_\_\_ Number of Years Known \_\_\_\_\_

Name and Position \_\_\_\_\_

Address \_\_\_\_\_

Phone Number ( ) \_\_\_\_\_ Number of Years Known \_\_\_\_\_

In your own words, briefly tell how you, will be able to assist us to continue our growth of academic excellence.

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Add here any additional information that you believe will assist in arriving at a true estimate of your qualifications.

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List any extra-curricular activities you are interested in supervising/coaching?\_\_\_\_\_

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As an applicant for employment with Ottawa-Glandorf Schools, I understand that Senate Bill 38 requires a criminal record check be conducted prior to employment on all job applicants who are under final consideration who may be responsible for the care, custody, or control of a child. If I am under final consideration for employment, I hereby grant permission for such a records check by the Bureau of Criminal Identification and Investigation (BCII) and for the release of any information obtained to the administration and board of education of the prospective employing district.

I also understand that Senate Bill 38 allows that the applicant can be made responsible for the cost of obtaining this record check. Failure to do so may result in the applicant not being considered for employment.

It is understood and agreed that any misrepresentation by me in this application will be sufficient cause for cancellation of this application and/or separation from the employer's service if I have been employed.

I give the Employer the right to investigate all references and to secure additional information about me, if job related. I hereby release from liability the Employer and its representatives for seeking such information and all other persons, corporations or organizations for furnishing such information.

Signature of Applicant \_\_\_\_\_ Date \_\_\_\_\_