



**MADEIRA CITY SCHOOL DISTRICT
7465 LOANNES DRIVE
CINCINNATI, OH 45243
513.985.6070 (PHONE)
513.985.6072 (FAX)**

APPLICATION FOR EMPLOYMENT

DATE OF APPLICATION _____

PERSONAL INFORMATION

FULL LEGAL NAME _____

FIRST MIDDLE LAST

CURRENT PERMANENT ADDRESS: _____

CITY, STATE, ZIP: _____

CELL PHONE: _____ HOME PHONE: _____ FAX: _____

PERSONAL EMAIL: _____

SS#: _____ DRIVERS LICENSE OR STATE ID# _____

POSITION FOR WHICH YOU ARE APPLYING: _____

CURRENT OHIO DEPARTMENT OF EDUCATION LICENSE HELD (ATTACH COPIES IF ANY)

EDUCATIONAL AIDE PERMIT # _____

PROFESSIONAL LICENSE/CERTIFICATE # _____

PUPIL ACTIVITY PERMIT # _____

BACKGROUND CHECKS: ATTACH MOST RECENT COPIES

FBI (DATE ISSUED) _____ BCI (DATE ISSUED) _____

EDUCATIONAL BACKGROUND

| LEVEL | NAME OF SCHOOL | YEARS ATTENDED | COURSE/MAJOR | YEAR GRADUATED/DEGREE |
|---------------|----------------|----------------|--------------|-----------------------|
| HIGH SCHOOL | | | | |
| COLLEGE/UNIV. | | | | |
| POST GRADUATE | | | | |
| TRADE SCHOOL | | | | |

The Madeira City School District is an equal opportunity institution and does not discriminate against persons because of race, religion, sex, age, or disability.

EMPLOYMENT HISTORY

LIST POSITIONS HELD, STARTING WITH CURRENT OR MOST RECENT EMPLOYMENT

| EMPLOYER | ADDRESS OF EMPLOYER | START DATE | END DATE | SUPERVISOR NAME | PHONE |
|----------|---------------------|------------|----------|-----------------|-------|
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LIST CERTIFICATIONS, EXPERIENCES OR SKILLS WHICH YOU POSSESS THAT QUALIFY YOU FOR THE POSITIONS (S) FOR WHICH YOU ARE APPLYING.

REFERENCES

LIST THREE ADDITIONAL REFERENCES THAT YOU HAVE WORKED WITH OR FOR IN OTHER CAPACITIES; VOLUNTEER, CHURCH, CLUBS, OR OTHER ORGANIZATIONS THAT CAN SPEAK TO YOUR WORK PERFORMANCE.

| NAME | TITLE OR RELATIONSHIP | REFERENCE PHONE & EMAIL |
|------|-----------------------|-------------------------|
| | | |
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READ CAREFULLY AND SIGN

All information provided by me in support of my application for employment is true and correct to the best of my knowledge. I understand that misrepresentations or omissions may disqualify my application or if already employed, may result in immediate dismissal. I hereby authorize any present or former employer, person, firm, corporation or government agency to answer any and all questions and to release or provide any information within their knowledge or records, and I agree to hold any and all of them blameless and free of any liability for releasing any truthful information that is within their knowledge or records. Candidates are employed by the Madeira City School District Board of Education based upon recommendation of the Superintendent of Schools. It is understood that the acceptance of employment in the Madeira School District is an acceptance of the policies, administrative guidelines, rules and regulations of Madeira City School District and as such the laws of the Federal Government and State of Ohio as it related to a public school district

FULL LEGAL SIGNATURE **DATE**

For Office use only
 License/Permit/Cert _____ I-9 _____ BCI _____ FBI _____ License _____ AESOP _____ PSW _____ Payroll _____
 Transcripts _____