



**Firelands Local Schools**  
 112 N. Lake St.  
 South Amherst, OH 44001  
 (440) 965-5821

Reset Form

For Office Use Only
Date Received: _____
Application Updated: _____
Application Updated: _____
Interviewed: _____
Interviewed: _____

## Classified Substitute & Summer Worker Application

**Date:** \_\_\_\_\_

**Personal Data**

**Name:** \_\_\_\_\_  
 (Title) (First) (Middle Initial) (Last)

Other name(s) under which transcripts, certificates, and former applications may be listed:

**Other:** \_\_\_\_\_  
 (Title) (First) (Middle Initial) (Last)

**Email Address:** \_\_\_\_\_

**Postal Address**

**Permanent Address**

Number & Street: \_\_\_\_\_  
 Apartment Number: \_\_\_\_\_  
 City: \_\_\_\_\_  
 State/Province: \_\_\_\_\_  
 Country: \_\_\_\_\_  
 Daytime Phone: \_\_\_\_\_  
 Home/Cell Phone: \_\_\_\_\_

**Present Address**

Number & Street: \_\_\_\_\_  
 Apartment Number: \_\_\_\_\_  
 City: \_\_\_\_\_  
 State/Province: \_\_\_\_\_  
 Country: \_\_\_\_\_  
 Daytime Phone: \_\_\_\_\_  
 Home/Cell Phone: \_\_\_\_\_

**Employment Desire**

<u>Position</u>	<u>Availability</u>
_____ Aide/monitor	_____ Full time
_____ Custodial/cleaning	_____ Part time
_____ Food service	_____ Either
_____ Bus driver/Bus mechanic	_____ Day shift
_____ Secretary	_____ Night shift
_____ Student worker	_____ Either
_____ Other _____	_____ Summer worker

## Experience

Please list ALL relevant work experience **beginning with the most recent.**

Current or Most Recent Position		Employer Contact Information		Supervisor/Reference Contact Information	
Date From – Date To:		Full or Part Time:		Last Annual Salary:	
Reason for Leaving:					
May we contact this employer?					
Responsibilities/Accomplishments					

Current or Most Recent Position		Employer Contact Information		Supervisor/Reference Contact Information	
Date From – Date To:		Full or Part Time:		Last Annual Salary:	
Reason for Leaving:					
May we contact this employer?					
Responsibilities/Accomplishments					

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Current or Most Recent Position		Employer Contact Information		Supervisor/Reference Contact Information	
Date From – Date To:		Full or Part Time:		Last Annual Salary:	
Reason for Leaving:					
May we contact this employer?					
Responsibilities/Accomplishments					

**Education**

Please tell us about your educational background beginning with the most recent.

High School Attended: \_\_\_\_\_

Graduation Status: \_\_\_\_\_

**Colleges, Universities, and Technical Schools Attended**

Name and location	Dates Attended: From – To	Major Area of study and number of	Minor area of study and number of	Degree	Date Conferred or Expected

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Name and location	Dates Attended: From – To	Major Area of study and number of	Minor area of study and number of	Degree	Date Conferred or Expected

**Professional References**

	Reference 1 of 3	Reference 2 of 3
<b>Name:</b>		
<b>School/Org:</b>		
<b>Current Position:</b>		
<b>Home Phone:</b>		
<b>Cell Phone:</b>		
<b>Work Phone:</b>		
<b>Mailing Address:</b>		
<b>Email:</b>		
<b>Relationship to Candidate::</b>		
<b>Years Known:</b>		
	Reference 3 of 3	Reference 4 of 4
<b>Name:</b>		
<b>School/Org:</b>		
<b>Current Position:</b>		
<b>Home Phone:</b>		
<b>Cell Phone:</b>		
<b>Work Phone:</b>		
<b>Mailing Address:</b>		
<b>Email:</b>		
<b>Relationship to Candidate::</b>		
<b>Years Known:</b>		

**Referrals**

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How did you hear about employment with us?

**Additional Information**

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List any additional information that will help in determining your professional qualifications for a position.

**Legal Information**

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Are you eligible to work in the United States? Yes No  
\_\_\_\_\_

**Equal Opportunity Employer**

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The Firelands Local School District is an Equal Opportunity Employer and ensures equal employment opportunities regardless of race, creed, gender, color, national origin, religion, age, sexual orientation or disability. The Firelands Local School District has a policy of active recruitment of qualified minority teachers and non-certified employees. Any individual needing assistance in making application for any opening should contact the Department of Human Resources.

**Applicant’s Acknowledgement and Agreement**

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By signing below, candidate authorizes the school district to conduct an investigation of candidate pursuant to The School Code to determine whether candidate has been convicted of any criminal or drug offenses as set forth in such statute, and, upon request, agrees to execute an investigation authorization form as a condition for candidate’s employment. The School Code also stipulates that the School District perform a check on the Statewide Sex Offender Database. Candidate may not be employed unless such investigations have been initiated.

I certify that the information given by me in this application is true in all respects, and I agree that if the information given is found to be false in any way, it shall be considered sufficient cause for denial of employment or discharge. I authorize the use of any information in the application to verify my statement, and I authorize past employers, all references and any other person to answer all questions asked concerning my ability, character, reputation, and previous employment record. I release all such persons from any liability or damages on account of having furnished such information.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Date

Revised October/2017