

**Kalida Local Schools**  
**Box 269, 301 N. 3<sup>rd</sup> St**  
**Kalida, Ohio 45853**  
**(419) 532-3534**

*"A Tradition of Excellence"*

*2001, 2002, 2003, 2004, 2005, 2006, 2007, 2008, 2009, 2010, 2011, 2012 Ohio Excellent School*  
*2003 National "Blue Ribbon" School*

APPLICANT'S NAME \_\_\_\_\_

POSITION DESIRED \_\_\_\_\_

PRESENT ADDRESS \_\_\_\_\_

\_\_\_\_\_

UNTIL (DATE) \_\_\_\_\_ PHONE \_\_\_\_\_

PERMANENT ADDRESS \_\_\_\_\_

\_\_\_\_\_ PHONE \_\_\_\_\_

**NOTICE REGARDING BACKGROUND SEARCH:** Please be advised that Senate Bill 38, requires that a Background Search be conducted 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 S.B. 38 allows that the applicant can be made responsible for the cost of obtaining this records check (currently \$15.00). Failure to do so may result in the applicant not being considered for employment.

APPLICANT'S SIGNATURE \_\_\_\_\_

DATE \_\_\_\_\_

*Applications will remain on file for two (2) school years.*

(Revised 1/13)

# COLLEGE EDUCATION

1. Name of School and Location \_\_\_\_\_

\_\_\_\_\_

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

Major/Minor \_\_\_\_\_ Total Hours \_\_\_\_\_  
(indicate semester or quarter)

2. Name of School and Location \_\_\_\_\_

\_\_\_\_\_

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

Major/Minor \_\_\_\_\_ Total Hours \_\_\_\_\_  
(indicate semester or quarter)

3. Name of School and Location \_\_\_\_\_

\_\_\_\_\_

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

Major/Minor \_\_\_\_\_ Total Hours \_\_\_\_\_  
(indicate semester or quarter)

# PERSONAL DATA

1. Give exact type of certificate/license(s) you hold \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

2. Teaching areas on your certificate/license(s) \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

3. Military Service: Total months \_\_\_\_\_ Dates (From/To) \_\_\_\_\_

4. List College Activities engaged in, and honors received before or since college. (Exclude activities or organizations which indicate race, creed, color, religion, or national origin)

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5. List any extra-curricular activities you could direct or coach.

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

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# EXPERIENCE

1. Name of School \_\_\_\_\_

Location \_\_\_\_\_

Dates Employed \_\_\_\_\_

Position (grade/subject(s)) \_\_\_\_\_

2. Name of School \_\_\_\_\_

Location \_\_\_\_\_

Dates Employed \_\_\_\_\_

Position (grade/subject(s)) \_\_\_\_\_

3. Name of School \_\_\_\_\_

Location \_\_\_\_\_

Dates Employed \_\_\_\_\_

Position (grade/subject(s)) \_\_\_\_\_

4. Name of School \_\_\_\_\_

Location \_\_\_\_\_

Dates Employed \_\_\_\_\_

Position (grade/subject(s)) \_\_\_\_\_

5. Name of School \_\_\_\_\_

Location \_\_\_\_\_

Dates Employed \_\_\_\_\_

Position (grade/subject(s)) \_\_\_\_\_

**REFERENCES:** These should be persons knowledgeable of your qualifications for the position you seek. Include especially superintendents, principals, directors, and/or administrators under whom you have worked.

1.Name \_\_\_\_\_

Position \_\_\_\_\_

Telephone No. \_\_\_\_\_ No. of Years Known \_\_\_\_\_

2.Name \_\_\_\_\_

Position \_\_\_\_\_

Telephone No. \_\_\_\_\_ No. of Years Known \_\_\_\_\_

3.Name \_\_\_\_\_

Position \_\_\_\_\_

Telephone No. \_\_\_\_\_ No. of Years Known \_\_\_\_\_

**PHILOSOPHY OF EDUCATION:** In your own words and handwriting, briefly tell how you, as an employee in the Kalida Local Schools, will be able to assist us to continue our growth of excellence in education.

The Kalida Board of Education is an Equal Opportunity Employer in compliance with Title VI of the 1964 Civil Rights Act, Titles VII and IX of The Educational Amendments, and Section 504 of the Rehabilitation Act, which prohibits discrimination because of RACE, COLOR, NATIONAL ORIGIN, HANDICAP, (AGE, SEX and/or RELIGION where applicable) in any facet of our operation except where such discrimination is bona fide, documented business necessity.