

EQUAL OPPORTUNITY EMPLOYER

APPLICATION FOR CLASSIFIED POSITION 2020-2021 SCHOOL YEAR

*APPLICATIONS MAY BE MAILED TO 597 HILLCREST DRIVE EATON, OHIO 45320 ATTN: SHAWN HOFF, ASSISTANT TO THE SUPERINTENDENT, OR EMAILED TO shawn.hoff@preblecountyesc.org

POSITION APPLIED FOR: SUBSTITUTE EDUCATIONAL ASSISTANT

TO THE APPLICANT

You will be required to apply for an Educational Aide Permit, through The Department of Education. There is a \$25.00 application fee. You must hold a high school diploma or the equivalent, and provide the Preble County Educational Service Center with evidence of the document. You are also hereby notified that according to SB 38, you will be required to have a criminal background check completed, at your expense, as a condition of your employment. The current fee for a FBI/BCI background check is \$64.

PLEASE PRINT

This form provides a summary of your personal and professional data. Prospective employees will receive consideration without discrimination because of age, color, creed, disability, national origin, race, or sex.

NAME:	_						
LAST		FIRST	FIRST		MIDDLE		
ADDRESS:							
STREET		CITY		STATE	ZIP CODE		
TELEPHONE:		SOCIAL SECURITY NUMBER:					
Have you been a resident of Ohio for the If no, please list previous address:	□ YES	□ NO					
Are you a citizen of the United States?		□ YES	□ NO				
Are you related to a current Preble Cour If yes, please list name and rela					Board? □ YES □ NO ———		
EDUCATION:							
NAME OF SCHOOL OR INSTITUTION	R YEARS ATTE		GRADUATED	S	UBJECTS STUDIED		

COMMENTS: (Please	list special skills,	subjects taken,	trainings, office equip	ment, or any type of c	certification you may have)	
ACTIVITIES: (Civic, A	Athletic, etc.)					
WORK EXPERIENCE:	(Plage list you	r last four ampl	overs helow starting	with your most recent	(amployer)	
EMPLOYER	START DATE	END DATE	POSITION POSITION	SALARY	REASON FOR LEAVING	
EMPLOYMENT DES	IRED:					
Position: Substitute Edu	acational Assist	<u>ant</u>				
Date you are available to start: Salary desired						
Are you presently emplo			•		employer? □ YES □ NO	
REFERENCES: (Give the names of NAME		ee persons not r		whom you have known at least one year) TELEPHONE YEARS KNOWN		
	<u> </u>					
I certify that the answers g submit, are true and compl		cation, as well a			or additional information I	
Furthermore, permission is employment, and any other consider me for employme	r agency checks,	as well as shari	-	-	dersigned, to conduct reference, may feel are necessary to	
In the event of employmen information or interview (s		-	I misleading information	on given in my applic	cation, resume, or additional	
E.S.C. Governing Board.	If the criminal red d that my employ	cord check show ment may be to	ald prove to be unacceperminated at the will of	otable to the Preble C	cceptable to the Preble County County E.S.C. Governing Board d without any type of hearing or	
SIGNA	TURE OF APP	LICANT			DATE	