

LEXINGTON LOCAL BOARD OF EDUCATION

103 Clever Lane

Lexington, Ohio 44904

Please return this form to the Lexington Board of Education

CLASSIFIED APPLICATION FOR EMPLOYMENT

Prospective employees will receive consideration without discrimination because of race, creed, color, age, national origin or handicap.

PLEASE TYPE OR PRINT

DATE ____/____/____

Last Name, First, Middle Initial	Social Security Number
Current Address: (Street, City, State, Zip Code)	Telephone Number
Previous Address: (Street, City, State, Zip Code)	From ____/____/____ To ____/____/____

EDUCATION

NAME AND LOCATION OF SCHOOL	FROM ____/____/____ TO ____/____/____	DID YOU GRADUATE YES___ NO___	SPECIFIC AREAS OF STUDY
NAME AND LOCATION OF SCHOOL	FROM ____/____/____ TO ____/____/____	DID YOU GRADUATE YES___ NO___	SPECIFIC AREAS OF STUDY
NAME AND LOCATION OF SCHOOL	FROM ____/____/____ TO ____/____/____	DID YOU GRADUATE YES___ NO___	SPECIFIC AREAS OF STUDY

MILITARY SERVICE

Branch of Service _____ Rank _____

Period of Active Duty _____ From ____/____/____

Are you currently a member of the National Guard or Reserves? _____

POSITION FOR CONSIDERATION

Circle each position for which you are requesting consideration for full time employment. Place a star by each position for which you wish to be considered for substitute employment.

Educational Aide _____ Secretary _____ Maintenance _____ Cook _____
 Mechanic _____ Custodian _____ Bus Driver _____ Other _____

EMPLOYMENT HISTORY

LIST IN CHRONOLOGICAL ORDER WITH LAST EMPLOYER FIRST

From: ____/____/____	Name and address of employer	Supervisors Name	Phone Number	Reason for leaving	Position/Salary
To: ____/____/____					
From: ____/____/____	Name and address of employer	Supervisors Name	Phone Number	Reason for leaving	Position/Salary
To: ____/____/____					
From: ____/____/____	Name and address of employer	Supervisors Name	Phone Number	Reason for leaving	Position/Salary
To: ____/____/____					
From: ____/____/____	Name and address of employer	Supervisors Name	Phone Number	Reason for leaving	Position/Salary
To: ____/____/____					
From: ____/____/____	Name and address of employer	Supervisors Name	Phone Number	Reason for leaving	Position/Salary
To: ____/____/____					

PERSONAL REFERENCES

LIST PEOPLE NOT RELATED TO YOU AND WHO HAVE KNOWN YOU FOR AT LEAST ONE YEAR

Name	Address	Phone #	Qualification as a Reference	Years Known
Name	Address	Phone #	Qualification as a Reference	Years Known
Name	Address	Phone #	Qualification as a Reference	Years Known

List any accommodations required for you to perform the essential job functions for the position which you are applying:

- * YOUR APPLICATION WILL BE ACTIVE ONE YEAR FROM THE DATE OF RECEIPT. TO MAINTAIN ACTIVE STATUS AFTER ONE YEAR, SUBMIT AN UPDATED RESUME WITH A REQUEST TO RE-ACTIVATE YOUR APPLICATION.
- * IF YOU HAVE ANY OTHER INFORMATION THAT YOU WOULD LIKE ADDED TO YOUR APPLICATION FOR OUR CONSIDERATION PLEASE ATTACH IT TO THE APPLICATION.

ANSWER EACH QUESTION IN THE SPACE PROVIDED IN YOUR OWN HANDWRITING

What is your main interest in applying for this position?

What attributes or qualities do you possess that would contribute most to Lexington Schools?

* All applications for employment are subject to a criminal records check through the Bureau of Criminal Identification and Investigation pursuant to the authority of Section 3319.32 and Section 109.57. Revised Code

* Have you ever been convicted of or pleaded guilty to, or are you currently charged with, any felony, any violation of Sections 2903.01, 2903.02, 2903.03, 2903.4, 2903.11, 2903.12, 2903.13, 2903.16, 2903.21, 2903.34, 2905.01, 2905.02, 2905.04, 2905.05, 2907.02, 2907.03, 2907.04, 2907.05, 2907.06, 2907.07, 2907.08, 2907.09, 2907.12, 2907.21, 2907.22, 2907.23, 2907.25, 2907.31, 2907.32, 2907.321, 2907.322, 2907.323, 2911.01, 2911.02, 2911.11, 2911.12, 2919.12, 2919.22, 2919.24, 2919.25, 2923.12, 2923.13, 2923.161, 2925.02, 2925.03, 3716.11 of the Revised Code, any comparable statute or ordinance of any other state or municipality or any offense of violence, theft offense (as defined in R.C. 2913.01), drug abuse offense (as defined in R.C. 2925.01) which is not a minor misdemeanor, or any misdemeanor sex offenses?

ANSWER BY SIGNING YOUR NAME AT THE APPROPRIATE ANSWERED:

NO _____

YES _____

*

Due to the length of time required for completion of the record check, it may occasionally be necessary to employ a person prior to the Board of Education having received the results of the criminal records investigation. In these cases, the Board of Education shall rely on the applicant information provided in the employ a person prior to the Board of Education having received the results of the criminal records the Board of Education prior to its receipt of a response from B.C.I., my employment shall be contingent upon subsequent receipt by the Board of Education of a report from B.C.I.. Which is consistent with my answer to the above question. In the event I have been employed prior to the Board of Education having received a report from B.C.I., and a subsequent report form B.C.I. is received which is not consistent with my answer to the above question, I specifically agree that the action of the Board of Education employing me shall be void without any further act by either party, and that my employment will terminate immediately without the necessity of proceedings to formally terminate my contract of employment.

Date: _____ Signed: _____

The information provided on this application is accurate. I understand that falsification of any information requested may result in my immediate termination.

Date: _____ Signed: _____