

EQUAL OPPORTUNITY EMPLOYER

APPLICATION FOR CLASSIFIED POSITION 2024-2025 SCHOOL YEAR

*APPLICATIONS MAY BE MAILED TO 597 HILLCREST DRIVE EATON, OHIO 45320 ATTN: MIKE DERRINGER, SUPERINTENDENT, OR EMAILED TO mike.derringer@preblecountyesc.org

POSITION APPLIED FOR:				
TO THE APPLICANT				
You will be required to apply for an Edfee. You must hold a high school diple of the document. You are also hereby completed, at your expense, as a condi-	oma or the equivalent, and proving notified that according to SB 38	de the Preble County Educat , you will be required to have	ional Service e a criminal	Center with evidence
This form provides a summary of your discrimination because of age, color, c	personal and professional data. reed, disability, national origin, 1	Prospective employees will race, or sex.	receive con	sideration without
NAME.	PLEASE P	RINT		
NAME:LAST	FIRST		MIDDLE	
ADDRESS:STREET				
STREET	CITY		STATE	ZIP CODE
EMAIL:	· · · · · · · · · · · · · · · · · · ·			
TELEPHONE:	SOCIA	L SECURITY NUMBER: _		
Have you been a resident of Ohio for the If no, please list previous address:	he last five years?	□ NO		
Are you a citizen of the United States?	□ YES	□ NO		
Are you related to a current Preble Cou If yes, please list name and relationship				oard? 🗆 YES 🗆 NO
EDUCATION:	7			
NAME OF SCHOOL OR INSTITUTION	YEARS ATTENDED	GRADUATED	SUB	JECTS STUDIED
EDUCATION: NAME OF SCHOOL OR	YEARS ATTENDED	GRADUATED		JECTS STUDIED

			n, trainings, office equ		of certification you may have)
ACTIVITIES: (Civid	;, Athletic, etc.)				
WORK EXPERIENCE EMPLOYER	E: (Please list you START DATE	ur last four emp END DATE	ployers below, startin POSITION	g with your most reco	ent employer.) REASON FOR LEAVING
EMPLOYMENT DI	ESIRED:				
Position:					
Date you are available	e to start:		_ Salar	y desired:	
Are you presently em					nt employer? □ YES □ NO
REFERENCES: (G	ive the names of th	ree persons not		m you have known at TELEPHONE	t least one year) YEARS KNOWN
NAME		1300111			
I certify that the answer submit, are true and cor		lication, as well			me or additional information I
Furthermore, permission employment, and any o consider me for employ	ther agency checks	s, as well as sha	County Educational String any and all sub	Service Center, by the mitted documents as	e undersigned, to conduct reference, they may feel are necessary to
In the event of employn information or interview	nent, I understand v (s) may result in	that any false a discharge.	nd misleading inforn	nation given in my ap	oplication, resume, or additional
E.S.C. Governing Board	 d. If the criminal r tand that my empl 	ecord check shoyment may be	ould prove to be una terminated at the wi	cceptable to the Preb	ck acceptable to the Preble County le County E.S.C. Governing Board Board without any type of hearing o
SIGNATURE OF APPLICANT					DATE