**Brookfield** **Local** **School** **District** 614 Bedford Road SE, Brookfield, Ohio 44403

Elementary: 330.619.5240 Middle School: 330.448.3003 High School: 330.448.3001 Central: 330.448.4930

**EMPLOYMENT** **APPLICATION** **BROOKFIELD** **LOCAL** **SCHOOL** **DISTRICT**

|  |  |
| --- | --- |
| Date received: Date interviewed: Interviewed by: |  |
|  |
|  |

Position Applied For: Date:

NAME

Last

ADDRESS

CITY

First Middle Maiden

STATE ZIP

HOME TELEPHONE CELL PHONE

|  |
| --- |
| **LICENSURE/CERTIFICATION** (if applicable) |
| TYPE | GRADE(S) | SPECIFIC AREAS | STATE | TYPE OF LICENSE | ISSUE/EXP DATE |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |

ACTIVITIES YOU CAN SUPERVISE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

HAVE YOU EVER HELD A CONTINUING CONTRACT? Yes □ No □ District:

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**PREVIOUS** **EMPLOYMENT**

(Brookfield Local School District reserves the right to contact current &/or former employers.)

**MOST** **RECENT** **JOB** **FIRST:** If you have a resume, attach to application & leave this section blank.

**Name** **and** **Address** **of** **Employer:**

Phone: ( ) Job Title (or grade/subject taught):

Supervisor's Name: From: (Mo)\_\_\_\_\_\_ (Yr)\_\_\_\_\_ To: (Mo)\_\_\_\_\_ (Yr) \_\_\_\_\_ Reason for leaving:

**Name** **and** **Address** **of** **Employer:**

Phone: ( ) Job Title (or grade/subject taught):

Supervisor's Name: From: (Mo)\_\_\_\_\_\_ (Yr)\_\_\_\_\_ To: (Mo)\_\_\_\_\_ (Yr) \_\_\_\_\_ Reason for leaving:

**Name** **and** **Address** **of** **Employer:**

Phone: ( ) Job Title (or grade/subject taught):

Supervisor's Name: From: (Mo)\_\_\_\_\_\_ (Yr)\_\_\_\_\_ To: (Mo)\_\_\_\_\_ (Yr) \_\_\_\_\_ Reason for leaving:

**Name** **and** **Address** **of** **Employer:**

Phone: ( ) Job Title (or grade/subject taught):

Supervisor's Name: From: (Mo)\_\_\_\_\_\_ (Yr)\_\_\_\_\_ To: (Mo)\_\_\_\_\_ (Yr) \_\_\_\_\_ Reason for leaving:

**MILITARY** **SERVICE** (if applicable)

Branch: From: (Mo)\_\_\_\_\_\_ (Yr)\_\_\_\_\_ To: (Mo)\_\_\_\_\_ (Yr) \_\_\_\_Rank at discharge: \_\_\_\_\_\_\_ Type of Discharge: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_If other than honorable, please explain: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**PROFESSIONAL** **REFERENCES**

(Please list three (3) professional references, with at least one from a previous employer.)

NAME RELATIONSHIP ADDRESS PHONE NUMBER

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**ASSURANCES**

Are you a citizen of the United States?

If no, are you authorized to work in the United States? Have you ever worked for Brookfield Schools?\*

Will you consent to a physical should the position require it?

Yes □ No □ Yes □ No □

Yes □ No □ **If** **yes\*,** **explain** **below.** Yes □ No □

Explanation for \*yes answers\* above: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**CRIMINAL RECORDS CHECK**

Ohio Revised Code 3319.39 prohibits a person convicted or who has plead guilty to certain offenses outlined in the Code, to be hired for a position involving care, custody, or control of a child. I understand that to be employed at Brookfield Local School District, I must submit a certified copy of a BCI&I and an FBI background check. The FBI background check must not be older than five (5) years. All costs associated with performing these background checks are solely the responsibility of the applicant. You are further advised that you may be conditionally employed by this district pending the outcome of the BCI&I and FBI checks. Should the results of these investigations indicate that you are not eligible for the position in which you are employed, you will be released from employment. I certify that the above information is complete, true and accurate. I understand that false and misleading information in this application and/or interview is grounds for termination of employment, and that I have a continuing duty to inform the Board of Education of any information coming to my attention after the date hereof that affects my employment or employment status. I have read this information regarding the required Criminal Records Checks and agree to the provisions stipulated.

Signature of Applicant: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Your** **application** **will** **remain** **in** **our** **active** **files** **for** **one** **year.** **If** **you** **wish** **to** **remain** **active** **thereafter,** **please** **reapply.**

**Any** **person** **who** **knowingly** **makes** **a** **false** **statement** **is** **guilty** **of** **falsification** **under** **R.C.** **2921.13,** **a** **misdemeanor** **of** **the** **first** **degree.** **(R.C.** **3319.393(A)** **enacted)**

Legal Notification: The Brookfield Local School District is an equal opportunity employer and as such, prohibits discrimination because of race, color, religion, age, handicap or disability, marital status, citzenship status, creed, national origin or sex as covered under Title I, Americans with Disabilities Act, Title VII of the Civil Rights Act of 1964, Equal Employment Opportunity Act of 1972, and Section 504 of the Rehabilitation Act of 1973.

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