Support	For Office Use Only		
Staff	Last Name:		
Application	First Name, Middle Initial: Position Desired:		
Cover	Date of Application:		
Sheet			

Checklist of Application Materials enclosed

Attach this form to the front of the application packet. Applications must include a current resume to be considered complete. Place a check mark (\square) in the list below for each item enclosed then attach them to the application form in the order listed.

 Application form is complete, signed, and dated.
 Complete resume is enclosed.
 Other (optional). For example, transcripts, certificates, letters of recommendation.

Return entire packet to:

Office of the Superintendent St. Henry Consolidated Local Schools 391 E. Columbus St. St. Henry, OH 45883

APPLICATION – SUPPORT PERSONNEL St. Henry Consolidated Local Schools 391 E. Columbus St. St. Henry, OH 45883

This form may be used to apply for any position that does not require a teaching certificate.

A. Personal Information

Last Name	First Name	ame Middle or Maiden Na		or Maiden Name
Address		City	State	Zip
Phone	Email		Alt contact name & phone	

B. Position Priority Request

Enter the type of work in the boxes below. (I.e. aide, bus driver, cafeteria, coach, custodial, secretary)

Type of Work	First Choice	Second Choice	Third Choice
Full-Time			
Part-Time			
Substitute			

Building/Age Level Preference. Circle all that apply.

<u> </u>	,	
Elementary	Middle School	High School
Preschool – Grade 4	Grades 5-8	Grades 9-12

C. Education

	Name and Location of School	Degree or Diploma Granted
College or Special Training		
High School		

D. Special Skills

Office	Computer	Like to work directly	Able to discipline
Experience	Skills	with Students	
Custodial	Mechanical	Restaurant or other kitchen	Comfortable
Experience	Know-how	experience for large groups	Working alone

Other special skills (Please list):

E. Work Experience

Name and Address of Employer (List last experience first)	Position/Duties	Dates inclusive (Month/Year) From Thru		Reason for Leaving

F. References

Please list one personal reference and two employment references from persons you believe have the best insight about your work capabilities and habits.				
lal	Name	Telephone	Relationship	
Personal				
Employment				
Emplo				

I certify that the information contained in this application is correct to the best of my knowledge and understand that falsification of this information or omissions of fact may be cause for denial or termination of employment. Any person who knowingly makes a false statement is guilty of falsification under Section 2921.13 of the Revised Code, which is a misdemeanor of the first degree. I authorize my past employers and the references listed above to give you any and all information concerning my previous employment and any other information they may have, personal or otherwise, and release all parties from all liability for any damage that may result from furnishing same to you. I understand that an offer of employment is subject to my completion, satisfactory to the District, of all pre-employment procedures.

Signature of Applicant

Date

This application will remain active for the current calendar year plus one additional calendar year.

CLASSIFIED EMPLOYEE APPLICANT QUESTIONS

The following questions are a very important part of our screening process. Please reflect upon them carefully and give us your candid responses in the space provided.

- What are your three most important reasons you want to work for our schools?
 1)
 - 2)
 - 3)
- 2. Why have you chosen to apply for the particular job(s) you have indicated?
- 3. What qualifications and experiences do you have that would make you an exceptional candidate for the position?
- 4. What three words best describe you?
 - 1)
 - 2)
 - 3)
- What three characteristics do you feel a good school employee should have?
 1)
 - 2)
 - 3)
- 6. How do you most want to influence the lives of students you would touch as a school employee?