

# Teacher Application Cover Sheet

| For Office Use Only          |       |
|------------------------------|-------|
| Last Name:                   | _____ |
| First Name, Middle Initial:  | _____ |
| Subject/Grade Level Desired: | _____ |
| Date of Application:         | _____ |
|                              |       |

## Checklist of Application Materials Enclosed

Attach this form to the front of the application packet. Place a check mark (T) 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.
- \_\_\_\_\_ Copies of all current teaching certificates/licenses are attached.
- \_\_\_\_\_ Copy of transcript is attached.

If any of the above information is missing, please explain why. (E.g., certificate in process.)

|  |
|--|
| <p><b>Return entire packet to:</b></p><br><p><b>Office of the Superintendent<br/>St. Henry Consolidated Local Schools<br/>391 E. Columbus St.<br/>St. Henry, OH 45883-9574</b></p> |
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**APPLICATION – CERTIFICATED PERSONNEL**  
**St Henry Consolidated Local Schools**  
 391 E. Columbus St.  
 St. Henry, OH 45883-9574

**A. Personal Information**

|                               |                   |                    |                     |              |
|-------------------------------|-------------------|--------------------|---------------------|--------------|
| <b>Last Name</b>              | <b>First Name</b> | <b>Middle Name</b> |                     |              |
| <b>Address: Street</b>        | <b>City</b>       | <b>State</b>       | <b>Zip</b>          | <b>Phone</b> |
| <b>Alternate Contact Name</b> |                   |                    | <b>Phone Number</b> |              |

**B. Ohio Certificate(s)/License(s) to Teach**

| Type   | Grade Span | Teaching Fields | Issue Date | Expiration Date |
|--|------------|-----------------|------------|-----------------|
| Give details If certificate/license is in progress or if a copy of your present one is not attached. |            |                 |            |                 |

**C. Position Priority Request**

|                     | First Choice | Second Choice | Third Choice |
|---------------------|--------------|---------------|--------------|
| <b>Grade Level</b>  |              |               |              |
| <b>Subject Area</b> |              |               |              |

**D. Teaching Experience**

| Name and Address of School System<br>(List last experience first) | Grade Level/ Subjects<br>Taught | Dates Inclusive<br>(school years) |      | Type of<br>Experience<br>(check one) |            |         |
|---|---------------------------------|-----------------------------------|------|--------------------------------------|------------|---------|
|   |                                 | From                              | Thru | Regular                              | Substitute | Student |
|   |                                 |                                   |      |                                      |            |         |
|   |                                 |                                   |      |                                      |            |         |
|   |                                 |                                   |      |                                      |            |         |

**E. Academic Training (Official Transcripts will be required upon offer of employment)**

| Name of College or University | Address (City) | Degree Held | Date Rec'd | Major | Minor |
|-------------------------------|----------------|-------------|------------|-------|-------|
|                               |                |             |            |       |       |
|                               |                |             |            |       |       |
|                               |                |             |            |       |       |

**F. Extra-Curricular Activities**

List activities you are willing to sponsor/coach or assist in sponsoring/coaching:

**G. References**

Please list three personal references and three professional references from persons you believe have the best insight about your teaching style.

|              | Name | Telephone | Relationship |
|--------------|------|-----------|--------------|
| Personal     |      |           |              |
|              |      |           |              |
|              |      |           |              |
| Professional |      |           |              |
|              |      |           |              |
|              |      |           |              |

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. 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 damages 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.

## TEACHER 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.

1. **What are your three most important reasons for wanting to be a teacher?**
  - 1.)
  - 2.)
  - 3.)
  
2. **How much do you want to know about your students in order to be most helpful to them?**
  
  
  
  
  
  
  
  
  
  
3. **What three things do you most want to know about your students?**
  - 1.)
  - 2.)
  - 3.)
  
  
  
  
  
  
  
  
  
  
4. **What do you need to know in order to begin your lesson planning for a class?**
  
  
  
  
  
  
  
  
  
  
5. **What four key components do you believe you must include in your plan?**
  - 1.)
  - 2.)
  - 3.)
  - 4.)
  
  
  
  
  
  
  
  
  
  
6. **When you think about your students, in what major ways do you most want to influence their lives?**
  
  
  
  
  
  
  
  
  
  
7. **What two core teaching strategies do you most use to achieve this result?**
  - 1.)
  - 2.)

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Signature of Applicant

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Date