APPLICATION
for a
TEACHING POSITION
in the
Colonel Crawford School District
North Robinson, Ohio 44856

An Equal Opportunity Employer

NAME _____
Last First Middle Initial

Temporary Address _____
City State Zip Code Phone

Permanent Address _____
City State Zip Code Phone

Date of Application _____ Social Security No: _____

☐ Elementary
☐ Junior High
☐ High School
☐ Special K-12

I. PREPARATION: (Name of School(s))

College/University _____

Graduation Date _____ Degree _____

Postgraduate Date _____

Graduation Date _____ Degree _____

Major _____ Sem Hrs _____

Minor _____ Sem Hrs _____

II. TEACHING EXPERIENCE

	Name of School	Months Taught	Dates of Teaching	Grade/Subject Teaching
a.				
b.				
c.				
d.				
e.				

III. SERVICE IN ARMED FORCES:

Years _____ Inducted _____ Discharge _____

IV. WHEN COULD YOU BEGIN WORK: _____

V. LIST ACTIVITIES YOU ARE ABLE TO SUPERVISE OR COACH:

_____

_____

_____

VI. TYPE OF CERTIFICATE PRESENTLY HELD & EXPIRATION DATE

_____

VII. SUBJECT(S)/GRADE YOU PREFER TO TEACH

_____

_____

VIII. ARE YOU UNDER CONTRACT FOR NEXT YEAR? _____

IX. LIST REFERENCES: Experienced teachers list superintendent and supervisors; beginning teachers include building principal, cooperating teacher and/or supervising teacher under whom you have taught who has first-hand knowledge of your character, personality, scholarship and teaching ability.

Official Position

NAME: _____

Address: _____ Phone: _____

NAME: _____

Address: _____ Phone: _____

NAME: _____

Address: _____ Phone: _____

NAME: _____

Address: _____ Phone: _____

This application will be kept on file in the Colonel Crawford Board of Education Office, therefore, we request a copy of transcript, your college credentials and a resume.