



Brown Local School District

Home of the
**MALVERN
HORNETS**

Malvern High & Middle Schools
Malvern Elementary
3242 Coral Rd NW
Malvern, OH 44644
330-863-1170
330-863-1366 Fax
www.brownlocalschools.com

Certified Employment Application

PERSONAL DATA

First Name Middle Last Name

Date of Application Are you a citizen of the U.S.? Yes No

Primary Phone Secondary Phone

Mailing Address: Street City State Zip

Home address if different than above

POSITION DESIRED

Type of employment desired? Will you accept substitute work? Yes No

Grade Level

Are you currently employed in education? Yes No If yes, what school and what position.

Present occupation if not in education. Present salary Are you under contract now? Yes No

Why do you wish to leave your current position?

Have you been granted a continuing contract (tenure) in a school district in Ohio? Yes No

If yes, when and where were you granted tenure (school district, county, date)

EDUCATION & TRAINING

High School	Location
College/University	Location
Major	Degree
Approximate GPA	Total Semester Hours
College/University	Location
Major	Degree
Approximate GPA	Total Semester Hours
College/University	Location
Major	Degree
Approximate GPA	Total Semester Hours
Student teaching experience:	

SUBJECT PREPARATION

Elementary applicants - List subjects and grade levels you are certified to teach by order of preference.

Secondary applicants - List subjects you are certified to teach in order of preference.

OTHER SCHOOLING TRAINING & PROFESSIONAL INFORMATION

SKILLS

TEACHING EXPERIENCE

Name of Employer	Date: From/To
Subject/Grade Taught	Number of years of experience granted
Reason for leaving	
Superintendent	

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Subject/Grade Taught	Number of years of experience granted
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Superintendent	

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Superintendent	

Name of Employer	Date: From/To
Subject/Grade Taught	Number of years of experience granted
Reason for leaving	
Superintendent	

COACHING INTEREST

Name the sports you feel you are qualified and have a desire to coach.

OTHER EXTRA CURRICULAR ACTIVITIES

Name the extra-curricular activities (other than sports) that you have a desire to become involved in.

OTHER WORK EXPERIENCE

Company	Job Title
Address	Date: from/to
Supervisor	May we contact? Yes <input type="checkbox"/> No <input type="checkbox"/>
Reason for leaving	

Company	Job Title
Address	Date: from/to
Supervisor	May we contact? Yes <input type="checkbox"/> No <input type="checkbox"/>
Reason for leaving	

MILITARY EXPERIENCE

Branch of Service	Type of Discharge
Total years of military	Honors

TEACHING CERTIFICATE/LICENSE

Name under which Certificate/License was granted

State	Type	Certificate/License	Date Issues	Date Expires
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State	Type	Certificate/License	Date Issues	Date Expires
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ACADEMIC/PROFESSIONAL REFERENCES

List three professional references that are familiar with the quality of your work, have worked directly with you, and have known you at least two years.

1. Reference

Primary Phone		Secondary Phone	
Address	City	State	Zip
Position	May we contact? Yes <input type="checkbox"/> No <input type="checkbox"/>		

2. Reference

Primary Phone		Secondary Phone	
Address	City	State	Zip
Position	May we contact? Yes <input type="checkbox"/> No <input type="checkbox"/>		

3. Reference

Primary Phone		Secondary Phone	
Address	City	State	Zip
Position	May we contact? Yes <input type="checkbox"/> No <input type="checkbox"/>		

I hereby declare the information provided by me in the application for employment is true, correct, and complete to the best of my knowledge. I understand that if employed, any misstatement or omission of fact on the application will be sufficient grounds for dismissal.

I authorize you to obtain information through personal interviews with my employers, friends, teachers, and acquaintances. This information, if obtained, may include facts about my character, general reputation, personal characteristics and teaching ability.

Signature

Date

It is the policy of this District that no candidate for a position in this District shall be discriminated against on the basis of race, color, religion, national origin or citizenship status, creed or ancestry, age, gender, status, non-disqualifying disability, height or other protected categories.

Ohio Revised Code requires a criminal background check when the applicant is under final consideration for employment.

Please return completed application to:
Office of the Superintendent
Brown Local Schools
3242 Coral Rd NW
Malvern, OH 44644