Northern Local School District
Certified Application

8700 Sheridan Road NW
Thornville, Ohio 43076
Phone 740-743-1303
FAX 740-743-3301

Required From All Applicants by Ohio Law

Finalists for positions must summit a certified copy of a background check from the Bureau of Criminal Identification and Investigation (BCI) prior to permanent employment. The certified copy must have been issued within the previous year. All applicants will be subject to a BCI background check and may be required to provide fingerprint impressions to the school district. For information contact B.C.I.I., P. O. Box 365, London, Ohio 43140.

Position Wanted ÿ High School ☐ ÿ Elementary ☐ ÿ Special ☐ College _____
ÿ Regular ☐ ÿ Substitute ☐ ÿ Other ☐ Major _____
Minor _____

Area of Certification _____

Personal Data

Name (Last, First, Middle)

_____Date _____

SSN: _____ DOB _____ email address _____

Current Address _____

City _____ State _____ Zip Code _____

Home Phone _____ Message Phone _____

Permanent Address _____

City _____ State _____ Zip Code _____

Education Record

High School _____

Dates Attended _____ Degree or Diplomas _____

College/University _____

Dates Attended _____ Degree or Diplomas _____

College/University _____

Dates Attended _____ Degree or Diplomas _____

Teaching Experience

Name of School List Most Current Experience First (Do not include student teaching)	Number of Years	From to	Grade/Subject
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Are you presently under contract for next year?

_____

Certification and General

Grade and Type of Certification _____Expiration Date _____

Certificate Number(s) _____

Subject or Grades you prefer to teach _____

List activities you are competent in and willing to direct or coach _____

Have you ever been granted a continuing contract? _____

Have you ever been arrested or convicted of a felony or sexual offense? If yes, please give details. _____

_____

Accumulated days of sick leave _____ Military Service _____ _____ Year _____to_____

Yes No

References

Name _____ Position_____

Complete address _____ Phone _____

Name _____ Position_____

Complete address _____ Phone _____

Name _____ Position_____

Complete address _____ Phone _____

Name _____ Position_____

Complete address _____ Phone _____

If you are employed, you will be required to file an official transcript of training, all Ohio teaching certificates, a verified record of teaching experience and a record of military service, if applicable in the office.

AN EQUAL OPPORTUNITY EMPLOYER