

# PATRICK HENRY LOCAL SCHOOL DISTRICT

6-900 State Route 18  
Hamler, Ohio 43524  
419-274-3015 Fax: 419-274-1641

## Administrative Application

To be considered an applicant, please complete this form. You also must provide the following:

1. A cover letter emphasizing your qualifications and reasons for your interest in this position.
2. Up-to-date resume and any additional relevant information.
3. Copy of a valid administrative license required for the position applying for.
4. A one-page statement of your educational and administrative philosophy.
5. Three current professional recommendation letters.
6. Mail all the materials to the superintendent at the address above

## PERSONAL INFORMATION

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Mr./Ms./Dr.	First Name	Middle Initial	Last Name
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Home Address	City	State	Zip
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Home Phone	Cell Phone	E-Mail Address
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## EMPLOYER INFORMATION

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Current Employer	Position	Salary
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Employer Address	City	State	Zip
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Where do you prefer to be contacted confidentially:     Home     Work     Either

**ADMINISTRATIVE EXPERIENCE** (starting with most recent experience)

Total Years of Administrative Experience \_\_\_\_\_

<u>Position</u>	<u>School/System</u>	<u>City/State</u>	<u>From</u>	<u>To</u>
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**TEACHING EXPERIENCE** (starting with most recent experience)

Total Years of Teaching Experience \_\_\_\_\_ Have you ever been granted a continuing contract? \_\_\_\_\_

<u>Position/Grade</u>	<u>School/System</u>	<u>City/State</u>	<u>From</u>	<u>To</u>
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**EDUCATIONAL HISTORY** (starting with most recent degree or advanced study)

<u>Degree</u>	<u>College/University</u>	<u>City/State</u>	<u>Major/Minor</u>	<u>Dates</u>
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## REFERENCES

Please list the names of four people who know your professional work and qualifications that are not related to you:

Name \_\_\_\_\_ Position \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_

Name \_\_\_\_\_ Position \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_

Name \_\_\_\_\_ Position \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_

Name \_\_\_\_\_ Position \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_

## MISCELLANEOUS INFORMATION

Yes     No    Have you ever been dismissed for cause from a position in a public or non-public school or child-care facility?

Yes     No    Have you ever had a teaching or administrative credential revoked or suspended; or do you have any action pending related to revocation or suspension?

If you answer "yes" to any of the above questions, you must attach a signed statement of explanation.

**As required by law, if I am under final consideration for employment, I hereby grant permission for a criminal background report by the Ohio Bureau of Criminal Identification and Investigation (BCII) and the Federal Bureau of Investigation (FBI) and for the release of any information obtained to the administration and board of education of the prospective employing district. Failure to do so may result in the applicant not being considered for employment.**

**I certify that all information disclosed is true and accurate to the best of my knowledge. I also authorize the Patrick Henry Local School District to contact references and investigate other personal or employment history that may be necessary in arriving at an employment decision. I further release employers, schools or persons from all liability in responding to inquiries in connection with my application for employment. In the event of employment, any significant misstatements or omissions later discovered in my background may be cause for my dismissal.**

Signature \_\_\_\_\_ Date \_\_\_\_\_