Print Form

MAHONING COUNTY EDUCATIONAL SERVICE CENTER

100 DeBartolo Place, Suite 220 ~ Youngstown, Ohio 44512-7011

Phone: (330) 965-7828 ~ Fax: (330) 965-7902 ~ WWW.MAHONINGESC.ORG

EMPLOYMENT APPLICATION FOR CANDIDATES UNDER FINAL CONSIDERATION

This Application for Employment, completed in entirety and signed to verify its accuracy, is a requirement for all candidates under final consideration for employment. While some information requested below may repeat that found on the Resume, this application is considered a legal document, falsification of which shall be considered fraud and immediate grounds for termination and possible legal civil action. Please complete this application with care. If you are hired, it becomes part of your official employment file, and by Ohio law a permanent public record.

DIRECTIONS: This form is a Adobe PDF Word document. Typed responses are preferred; printing is required. You may save the document on your computer for future revisions. Do not leave any item blank – use N/A if not applicable. You must sign all areas required and noted with ☒. Please maintain a copy of your completed application.

A. CANDIDATE DEMOGRAPHIC PROFILE INFORMATION:

1. Position Applying For: Date Submitted:

2. Name in Full:
First *Middle* *Last* *Jr/Sr/Etc.*

3. Other Name (Maiden, etc.):

4. Present Address:
Street *City* *State* *Zip*

5. Home Phone: ( ) Business Phone: ( ) Cell Phone: ( )

6. E-Mail Addresses: (1) (2)

7. Are you currently under contract? ☐ No ☐ Yes -- Position: District:

**Immediate Supervisor:* *Supervisor Phone: ( )*

8. Current Salary: $ Number of Contract Work Days: Accumulated Sick Leave:

9. Have you secured a release from a current contract if you are offered employment? ☐ No ☐ Yes

10. Date you are available for employment:

11. Were you ever granted tenure in any Ohio district? ☐ No ☐ Yes – District: Year:

12. Were you ever denied tenure when eligible? ☐ No ☐ Yes – Employer:
- Explain

**Explanation:*

13. Have you ever been issued a formal written reprimand by a supervisor? ☐ No ☐ Yes – Explain:
**Explanation:*

14. Are you aware of any reason why a present/former supervisor would not recommend you for this position?
☐ No ☐ Yes – Explain:
**Explanation:*

15. Have you ever been non-renewed or terminated from employment? ☐ No ☐ Yes – Explain:
**Explanation:*

16. Have you ever resigned in mid contract year from any position? ☐ No ☐ Yes – Employer(s):
**Explanation:*

17. Do you smoke? ☐ No ☐ Yes Do you agree to participate in a wellness program? ☐ No ☐ Yes

18. Pre employment drug testing, which includes testing for nicotine, is a requirement prior to employment, and employment decisions include the results of such testing. Do you consent to this pre employment testing?
☐ Yes ☐ No –Explain:
**Explanation:*

B. MILITARY EXPERIENCE:

Branch of Military	Status / Nature of Assignment	Years	Discharge Date

C. CREDENTIALS. LIST OHIO ADMINISTRATIVE/TEACHER CREDENTIALS HELD:

Type of Certificate/License *(Permanent, Professional, Provisional)*	Certificate/Licensure Area	Grade Levels	Expiration Date

C-1: HIGHLY QUALIFIED TEACHER STATUS

If you are under consideration for a teaching position, please identify below how you can verify HIGHLY QUALIFIED TEACHER STATUS according to Federal and Ohio NCLB Standards. HQT Worksheets can be found at WWW.ODE.STATE.OH.US – Search for *HQT Toolkit.*

D. EDUCATIONAL AND PROFESSIONAL TRAINING

Institution Name Most Recent First	Identify Area of Study, Degree, Nature of Work	Dates Attended Date Conferred	Total Semester Hours

E. PROFESSIONAL EXPERIENCE (MOST RECENT FIRST)

District, Building, & Supervisor	Management Position, Subjects Taught, Grade Levels	Dates To-From	# of Years

F. OTHER WORK EXPERIENCE (BUSINESS, TRADE, PROFESSIONAL, ETC.)

Company & Supervisor	Position Held	Dates To-From	# of Years

G. REFERENCES – GIVE FIVE REFERENCES INCLUDING, BUT NOT LIMITED TO, SUPERINTENDENTS OR SUPERVISORS UNDER WHOM YOU HAVE WORKED WHO HAVE FIRST-HAND KNOWLEDGE OF YOUR CHARACTER, PERSONALITY, SCHOLARSHIP, TEACHING, AND/OR ADMINISTRATIVE ABILITY. YOU MAY BE ASKED TO SUBMIT LETTERS OF REFERENCE IN ADDITION -- *BOXES WILL EXPAND*.

Superintendent/Supervisor's Name	Full Address (Street, City, Zip) & Email Address	Telephone

H. SUPPLEMENTAL BACKGROUND:

1. Areas of interest outside your profession:

2. Community/Civic Organizations including offices held:

3. Additional information (including, but not limited to, publications memberships or additional qualifications) you wish us to know that will supplement this application:

4. Are there any reasons why you would not be able to perform any of the essential functions of the job for which you are applying (with or without a reasonable accommodation that would not impose an undue hardship)?

☐ No ☐ Yes – Explain:
**Explanation:*

I. LEGAL RESPONSES & SIGNATURE VERIFICATION – PLEASE READ CAREFULLY:

RESPOND YES OR NO TO EACH OF THE FOLLOWING. **If you answer YES** to any question, attach an explanation to this application. Include complete details and individuals who can verify; if criminal, include the **year of conviction**, the **nature of the offense**, and the **court where the matter was heard.**

YES	NO	READ EACH QUESTION CAREFULLY
☐	☐	Have you ever been convicted of, found guilty of, pled guilty to, or pled no contest to any misdemeanor other than a traffic offense?
☐	☐	Have you ever been convicted of, found guilty of, pled guilty to, or pled no contest to any felony?
☐	☐	Have you ever had ANY criminal conviction sealed or expunged?
☐	☐	Have you ever had ANY professional certificate, license, or permit, or an application for same, revoked, suspended, limited, or denied?
☐	☐	Have you ever surrendered ANY certificate, license, or permit?
☐	☐	Are you presently being investigated or under a procedure to consider your discharge for misconduct by your present employer?
☐	☐	Are you currently the subject of any investigation for violations of law in any state that could serve as a bar to employment with this agency or in any Ohio school district?
☐	☐	Have you every been non-renewed from public employment?
☐	☐	Have you ever been discharged or asked to resign from a prior position?
☐	☐	Have you ever resigned under threat of termination?

☒Signature: Date:

J. REQUIRED AFFIDAVIT SIGNATURE – PLEASE READ CAREFULLY:

My signature below authorizes the MSESC to conduct a background investigation and authorizes release of information in connection with my application for employment. I acknowledge being informed that as a precondition to employment, I must, in accordance with Ohio law, both provide fingerprints and satisfactorily pass a criminal records checks (Ohio BCI and federal FBI) if I come under final consideration for employment. I further understand that should I be offered employment, the employment is contingent upon satisfactory clearances as required by law. Employment shall be only on a conditional basis until a satisfactory criminal record report has been received. I understand that the costs associated with background checks may be my responsibility.

I also understand that as a precondition to employment with the MSESC, I must pass a tuberculosis screening and that the costs associated with such screening are my responsibility. If offered a position, I understand I may be asked to undergo a physical examination and drug testing to include testing for nicotine.

All information on this application is accurate and subject to verification by the MCESC. I represent that responses on this application and all information furnished in conjunction with this application is true and accurate to the best of my knowledge. I further recognize that should the MCESC discover that I made false statements or material omissions, I will not be hired, or if already hired, I will be subject to termination from employment. I hereby give permission to the MCESC or its duly authorized representative to contact any persons or organizations named in this application and anyone else who may have knowledge about my abilities and character. I release those so requesting, receiving, and providing that information, and their respective agents and principals, from any and all liability in connection therewith to the full extent permitted by law.

I agree that any claim or lawsuit relating to my service with the Mahoning County Educational Service Center or any of the agencies for which it employs staff must be filed no more than six (6) months after the date of the employment action that is the subject of any claim or lawsuit. I waive any statute of limitations to the contrary. I further recognize that if I am applying for a position with a School District Board of Education for which the MCESC is the search agent, the above statements and verifications apply to my status as an applicant to and as an employee of the employing school board.

☒ Signature: Date:

The Governing Board of the Mahoning County Educational Service Center is an equal opportunity employer and does not discriminate with regard to its employment policies, personnel practices or educational programs on the basis of race, color, religion, national origin, sex, disability, sexual orientation or age. No question on this application is asked for the purpose of limited or excluding any applicant's consideration for employment because of his or her race, color, religion, national origin, sex, disability, sexual orientation or age.

J. SUPPLEMENT: OHIO LAW AND EMPLOYMENT IN SCHOOL DISTRICTS

OAC 3301-20-01 specifically states that the rule is applicable to records of convictions that have been sealed pursuant to section 2953.32 of the Revised Code when the information contained in those sealed records bears a direct and substantial relationship to the position for which the individual is being considered.

A district cannot employ and the state board cannot issue an initial teaching license to any applicant, if an applicant has been convicted of or pled guilty to:

- any of the following offenses;
- attempt, complicity or conspiracy to any of the following offenses; or
- any offense of a municipal ordinance or law of this state, another state or the United States that is substantially equivalent to any of the following offenses.

Identification of conviction or plea of guilty to any one of these offenses permanently disqualifies the applicant for initial licensure or employment. Any sealed or expunged convictions are also checked.

ORC	Offense
2903.01	Aggravated Murder
2903.02	Murder
2903.03	Voluntary Manslaughter
2903.04	Involuntary Manslaughter
2903.041	Reckless Homicide
2903.11	Felonious Assault
2903.12	Aggravated Assault
2903.15	Permitting Child Abuse
2905.01	Kidnapping
2905.02	Abduction
2905.04	Child Stealing (Repealed)
2905.05	Criminal Child Enticement
2905.11	Extortion
2907.02	Rape
2907.03	Sexual Battery
2907.04	Unlawful Sexual Conduct With a Minor
2907.05	Gross Sexual Imposition
2907.06	Sexual Imposition
2907.07	Importuning
2907.12	Felonious Sexual Penetration (former sect)
2907.21	Compelling Prostitution
2907.22	Promoting Prostitution
2907.23	Procuring
2907.24	Soliciting; after positive HIV test
2907.241	Loitering to Engage in Prostitution; Soliciting after positive HIV test
2907.31	Disseminating Matter Harmful to Juveniles.
2907.311	Displaying Matter Harmful to Juveniles
2907.32	Pandering Obscenity
2907.321	Pandering Obscenity Involving a Minor
2907.322	Pandering Sexually Oriented Matter Involving a Minor
2907.323	Illegal Use of Minor In Nudity-Oriented Material or Performance
2907.33	Deception to Obtain Matter Harmful to Juveniles
2907.34	Compelling Acceptance of Objectionable Materials
2909.02	Aggravated Arson
2909.22	Soliciting or Providing Support for Acts of Terrorism
2909.23	Making Terroristic Threat
2909.24	Terrorism
2911.01	Aggravated Robbery
2911.02	Robbery
2911.11	Aggravated Burglary
2911.12	Burglary
2913.44	Personating an Officer
2917.01	Inciting to Violence
2917.02	Aggravated Riot
2917.03	Riot
2917.31	Inducing Panic
2917.33	Unlawful Possession or Use of Hoax Weapon of Mass Destruction
2919.12	Unlawful Abortion
2919.121	Performing or Inducing Unlawful Abortion Upon a Minor
2919.13	Abortion Manslaughter
2919.22	Endangering Children (if division (B)(1), (2), (3) or (4) is violated)
2919.23	Interference of Custody - if a violation of this statue (R.C. §2919.23) would have been a violation of R.C. §2905.04 (child stealing) before 7/1/96.
2921.02	Bribery
2921.03	Intimidation
2921.04	Intimidation of Attorney, Victim or Witness in Criminal Case
2921.05	Retaliation
2921.11	Perjury
2921.34	Escape
2921.41	Theft in Office
2923.122	Illegal Conveyance or Possession of Deadly Weapon or Dangerous Ordinance or Illegal Possession of Object Indistinguishable from Firearm in School Safety Zone
2923.123	Illegal Conveyance of Deadly Weapon or Dangerous Ordinance into Courthouse; Illegal Possession or Control in Courthouse
2923.161	Improper Discharge Firearm at or into Habitation; School-related Offenses
2923.17	Unlawful Possession of Dangerous Ordinance; Illegally Manufacturing or Processing Explosives
2923.21	Improperly Furnishing Weapons to a Minor
2925.02	Corrupting Another With Drugs
2925.03	Trafficking in Drugs
2925.04	Illegal Manufacturing of Drugs or Cultivation of Marihuana
2925.041	Illegal Assembly or Possession of Chemicals for the Manufacture of Drugs
2925.05	Funding of Drug or Marihuana Trafficking
2925.06	Illegal Administration or Distribution of Anabolic Steroids
2925.13	Permitting Drug Abuse
2925.22	Deception to Obtain a Dangerous Drug
2925.23	Illegal Possession of Drug Documents
2925.24	Tampering With Drugs

2925.32	Trafficking in Harmful Intoxicants; Improperly Dispensing or Distributing Nitrous Oxide
2925.36	Illegal Dispending of Drug Samples
2925.37	Possession of Counterfeit Controlled Substances
2927.24	Contaminating Substance for Human Consumption or Use or Contamination with Hazardous Chemical, Biological, or radioactive Substance; Spreading false report
3716.11	Placing Harmful Objects in Food/Confection

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For Office Use Only	
Date of Interview:	Interviewers:
Date of Interview:	Interviewers:
Status Following Interview:	Board Action Date:
References: 1. 2. 3. 4. 5. 6. 7. 8.	
Commitment Signature for Supplemental License:	Signature of Commitment for HQ Status:
Supplemental/Other License Application:	Licenses:
License History Report:	Misconduct Report:
BCI:	FBI:
Transcripts	Employment Verifications:
Statement Accumulated Sick Leave:	Board Action Date
TB Test:	Board Action Date