

## NORTHEASTERN LOCAL SCHOOL DISTRICT 1414 BOWMAN ROAD SPRINGFIELD, OHIO 45502 (937) 325-7615

## APPLICATION FOR SUB TEACHER POSITIONS ONLY

Name:			Date:		
Last	First	Middle			
Social Security Number:	Security Number: Telephone:				
Present Address:					
Street/R	oad Apt	#	City	Zip	
Date available to accept posi	tion				
CHECK GRADE AND TYPE OF CI	ERTIFICATION(S) YO	U HOLD OR WILL H	OLD BY JULY 1:		
		GRADE			
Temporary2YR Provisional	4YR Provisional	5YR Provisiona	l8YR Provisional _	Permanent	
	TYPE OF	CERTIFICATE(S)	)		
Pre-Kindergarten	Elementa	Elementary Principal		Educ. Of Handicapped	
Kng./Primary K-3	High Sch	High School Principal		Specific Learning Disability	
Kng./Elem K-8	Supervise	or	Cognitive Disability		
Elementary 1-8	Superinte	endent	OWA/OWE		
High School 7-12	Local Su	perintendent	Pupil Pers/Counselor/Psych		
Special K-12	Vocation	al	Other		
Holder of Elementary Certification	ate – List any area	of concentration	and grade(s) you pre	efer to teach:	
Holder of High School/Special Certi	ficate: list the grade le	vel and/or subjects yo	ou are certified to teach in	order of preference	
Grade Level	Subjects		QTR Hrs. o	or Sem. Hrs	

List any extracurricular that you feel competent to direct (ex. coaching, drama, etc):

COMPLETE ALL BLANKS. DO NOT WRITE "SEE RESUME OR VITA" EDUCATIONAL AND PROFESSIONAL TRAINING.

High School	Location					
Higher Education – College/University	Location/Address QTR/HRS			CR SEM/HRS/CR Degree		
Most Recent Full-Time Teaching Experi	ence Location		on	Grade/Subject Ye		
For substitute teaching experience: List the	ne last three	e (3) principals				
Name		School		Address & Phone Number		
Please submit your college creder References: List three (3). If you h						
Name		Phone Numb	oer	Address		
			<u> </u>			
List last full-time employment:  Company	T	Supervisor		Address & Phone Number		
Сотрану		Gupervisor		Address & Filo	ie Number	
List below any extracurricular activitie	s that you	ı feel compete	nt to direct: Exam	ple – coaching, d	rama,etc.	
Have you lived out-of-state during the	e past 5 ve	ears? Y	ESNO			
Have you been fingerprinted recently						
,						

PLEASE ENCLOSE A COPY OF YOUR OHIO TEACHING LICENSE(S)
READ CAREFULLY BEFORE SIGNING

I agree that any claim or lawsuit relating to my service with Northeastern Local School District or any of its subsidiaries must be filed no more than six (6) months after the date of the employment action that is the subject of the claim or lawsuit. I waive any statute of limitations to the contrary.					
Signature	Date				
on this application shall be considered sufficient cause f employers, educational institutions, and records to the N	rue and complete, and I understand that false statements or information withheld for dismissal. I hereby authorize the release of all information from previous Northeastern Local School District. I also grant permission for a background other law enforcement agency deemed necessary (a signature is required for				
Signature	Date				
•	strict to contract my references who names I have submitted. I voluntarily release ormation from any liability or legal claims relating to the use of information				
Signature This application will be considered active for twelve (12) employment record.	Date ) months from the date filed. If you ar hired, it becomes part of your official				

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