



HAMILTON

LOCAL SCHOOL DISTRICT

Licensed/Certificated Employment Application

APPLICANT INFORMATION						
Last Name		First		M.I.	Date	
Street Address				Apartment/Unit #		
City			State		ZIP	
Phone			E-mail Address			
Date Available	Social Security No.		-	-	Position Applied for	
Are you a citizen of the United States?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If no, are you authorized to work in the U.S.?		YES <input type="checkbox"/>	NO <input type="checkbox"/>
Have you ever worked for Hamilton Local?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If so, when?			
Do you have a Continuing Contract?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If so, where and when?			

LICENSURE				
Indicate below the type and grade of OHIO license(s) you hold or for which you have applied. If employed, your license must be recorded in the Superintendent's Office before your 60 th date of employment of your pay will be withheld.				
License No:		License Type:		Expires
License No:		License Type:		Expires

EDUCATION				
High School		Address		
From	To	Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
		Degree		
College		Address		
From	To	Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
		Degree		
Other		Address		
From	To	Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
		Degree		

REFERENCES	
<i>Please list two professional references.</i>	
Full Name	Relationship
Institution	Phone ()
Address	
Full Name	Relationship
Institution	Phone ()
Address	

PREVIOUS EMPLOYMENT			
Institution		Phone ()	
Address		Supervisor	
Job Title	Starting Salary \$	Ending Salary \$	
Responsibilities			
From	To	Reason for Leaving	
Institution		Phone ()	
Address		Supervisor	
Job Title	Starting Salary \$	Ending Salary \$	
Responsibilities			
From	To	Reason for Leaving	
Institution		Phone ()	
Address		Supervisor	
Job Title	Starting Salary \$	Ending Salary \$	
Responsibilities			
From	To	Reason for Leaving	

MILITARY SERVICE	
Branch	From To
Rank at Discharge	Type of Discharge
If other than honorable, explain	

DISCLAIMER AND SIGNATURE	
<p>It is understood and agreed that the Hamilton Local School District may contact former employer(s) for verification of my employment history and the Bureau of Criminal Identification and Investigation (BCI/FBI) for a background check and I hereby consent to such inquiries. It is understood that if I come under final consideration for appointment of employment in a position as a person who is responsible for the care, custody, or control of a child (which may include nonteaching employees), and, as a precondition to employment, I shall be required to provide a set of fingerprint impressions, and a criminal records check shall be conducted and must be satisfactorily completed.</p> <p>I understand that if I am employed prior to the District's receipt of the BCI/FBI report and verification of my experience, my continued employment will be conditioned on: 1) satisfactory work experience as verified by contact with former employers; 2) receipt of a report demonstrating that I am in compliance with the Board of Education's rules and regulations regarding applicant/employee criminal records and disclosure of criminal conviction listed in category OTHER; and 3) a satisfactory result of the criminal records check. If further understand that falsification of any and all information on this application shall result in my being disqualified from employment, or in my employment being terminated. By affixing my signature, I agree to the conditions listed on this application and will, if employed tender my resignation of employment should I fail to fulfill these conditions.</p> <p>The Hamilton Local Board of Education is an Equal Opportunity Employer.</p>	
Signature	Date

STATEMENT OF JOB APPLICANT REGARDING CRIMINAL RECORD
(O.R.C. 3319.39)

I, _____, have not been convicted of, or entered a guilty plea to, any of the following offenses OR ANY PRIOR OR EXISTING LAWS OF OHIO WHICH ARE SUBSTANTIALLY SIMILAR OR ANY PRIOR OR EXISTING LAWS OF ANOTHER STATE OR THE FEDERAL GOVERNMENT WHICH ARE SUBSTANTIALLY SIMILAR:

2903.01	Aggravated murder	2907.21	Compelling prostitution	2919.25	Domestic violence
2903.02	Murder	2907.22	Promoting prostitution	2923.12	Carrying concealed weapons
2903.03	Voluntary manslaughter	2907.23	Procuring	2923.13	Having weapons while under disability
2903.04	Involuntary manslaughter	2907.25	Prostitution	2923.161	Improperly discharging a firearm at or into a habitation or school
2903.11	Felonious assault	2907.31	Disseminating matter harmful to juveniles	2925.02	Corrupting another with drugs
2903.12	Aggravated assault	2907.32	Pandering obscenity	2925.03	Trafficking in drugs
2903.13	Assault	2907.321	Pandering obscenity involving a minor	2925.04	Illegal manufacture of drugs or cultivation of marihuana
2903.16	Failing to provide for a functionally impaired person	2907.322	Pandering sexually oriented matter involving a minor	2925.05	Funding of drug or marihuana trafficking
2903.21	Aggravated menacing	2907.323	Illegal use of minor in nudity-oriented material or performance	2925.06	Illegal administration or distribution of anabolic steroids
2903.34	Patient abuse or neglect	2911.01	Aggravated robbery	2925.11	Drug possession (other than minor offense)
2905.01	Kidnapping	2911.02	Robbery	3716.11	Placing harmful objects in food or confection
2905.02	Abduction	2911.11	Aggravated burglary		
2905.04	Child stealing (former law)	2911.12	Burglary		
2905.05	Child enticement	2919.12	Unlawful abortion		
2907.02	Rape	2919.22	Endangering children		
2907.03	Sexual battery	2919.23	Interference with custody (child stealing)		
2907.04	Corruption of a minor	2919.24	Contributing to unruliness or delinquency of a child		
2907.05	Gross sexual imposition				
2907.06	Sexual imposition				
2907.07	Importuning				
2907.08	Voyeurism				
2907.09	Public indecency				
2907.12	Felonious sexual penetration				

OR

ANY FELONY, OR ANY OFFENSE OF VIOLENCE, THEFT OFFENSE, OR DRUG ABUSE OFFENSE, UNDER EITHER STATE LAW OR ANY SIMILAR MUNICIPAL ORDINANCE, THAT IS NOT A MINOR MISDEMEANOR.

 (Signature of Applicant)*

 Date

**If you cannot sign this form for any reason please write an explanation on a separate page or discuss directly with the hiring officer.*

FALSIFICATION OF THIS STATEMENT SHALL BE GROUNDS FOR NON-HIRING OR IMMEDIATE DISCHARGE.

ADDITIONAL QUESTIONS FOR APPLICANT

(1) Have you ever been charged with one of the offenses listed on the preceding page, and subsequently been convicted of, or pleaded guilty or no contest to, a lesser offense based on the same incident? YES NO

If "YES", please give details below:

(2) Have you ever been convicted of, or pleaded guilty or no contest to, an ATTEMPTED version of any of the offenses listed on the preceding page? YES NO

If "YES", please give details below:

(3) Have you ever been subject to an investigation for child abuse conducted by a Children's Services agency or a law enforcement agency? YES NO

If "YES", please give details below and indicate the results of the investigation:

(4) Are there any criminal charges currently pending against you other than a minor misdemeanor or misdemeanor traffic offense? YES NO (An affirmative response to this question will not necessarily disqualify the applicant.)

If "YES", please give details below:

(5) Have you ever been reported to the Ohio Department of Education for professional misconduct? (Amended HS 79) YES NO

If "YES", please give details below:



(Signature of Applicant)

(PRINT FULL NAME)

Date signed: _____