

**CLASSIFIED STAFF APPLICATION
WAYNESFIELD-GOSHEN LOCAL SCHOOLS**

Application Date: _____

Date Received: _____

NAME: _____

S.S. Number: _____

Street Address: _____

Home Phone Number: (____) _____

City/State/Zip: _____

Work Phone Number: (____) _____

Email Address: _____

Cell Phone Number: (____) _____

I am applying for (check all that apply):

Bus Driver _____	Substitute Bus Driver _____
Teacher Aide _____	Substitute Teacher Aide _____
Bus Aide _____	Substitute Bus Aide _____
Secretary _____	Substitute Secretary _____
Custodian _____	Substitute Custodian _____
Cafeteria _____	Substitute Cafeteria _____
Coaching _____	
Other (please explain): _____	

If applicable, please list days of the week that you are NOT available to substitute: _____

Have you ever had a FBI/BCI fingerprint report done? _____ If yes, please submit to office. If your FBI report is over 5 years old you will need to have a new one completed. Please see District Building office.

Professional Preparation: (Name & Location)

High School _____ Graduated: (circle) yes no

College _____ Degree _____

Special Training _____

Work Experience: (List chronologically with most recent experience first.)

Employer Name & Address:	Phone:	Position/Duties Performed	Employment Dates From:
			To:
Employer Name & Address:	Phone:	Position/Duties Performed	Employment Dates From:
			To:
Employer Name & Address:	Phone:	Position/Duties Performed	Employment Dates From:
			To:

List other names (maiden/divorced) that employers/schools may have listed for you: _____

List experiences where you have worked with children (e.g., school, home, community, camp, church, etc.):

Professional References: (List persons who have first-hand knowledge of your work experience and/or character. Especially include persons that know of your experience working with children.)

Name:	Daytime Phone:
Business/School:	Position:
Street Address:	City/State/Zip:
Name:	Daytime Phone:
Business/School:	Position:
Street Address:	City/State/Zip:
Name:	Daytime Phone:
Business/School:	Position:
Street Address:	City/State/Zip:

Do we have permission to contact your references? _____ Yes _____ No

Please give any additional information which will assist us in arriving at a realistic appraisal of your qualifications.

In accordance with Ohio law, I understand that I must both provide a set of fingerprints and satisfactorily pass a criminal records check as a precondition to employment. If the records check should prove to be unacceptable to the Board of Education, I understand that my employment/application may be terminated without any type of hearing or statement of reason for such action.

Signature: _____ Date: _____

I hereby certify that the information set forth in this application is true and complete to the best of my knowledge. I understand that any misrepresentation, falsification, or omission will be sufficient cause for denial or discharge of employment.

Signature: _____ Date: _____

A complete application folder consists of: (Job Dependent)

1. Signed application form.
2. FBI and BCI fingerprint reports before employed

Please return information to:
Waynesfield-Goshen Local Schools 500
N. Westminster St.
Waynesfield, Ohio 45896

NOTE: Applications will be kept on file for two years. Please advise office of change in employment or address.

W-G Schools is an Equal Opportunity Employer and does not discriminate with regard to race, color, religion, national origin, gender, age, military status, ancestry, or handicapped status. Information is solely to determine the applicant's ability to perform job satisfactorily.