

Allen County Educational Service Center

1920 Slabtown Rd.
Lima, OH 45801
419-222-1836, Fax: 419.224.0718



EQUAL OPPORTUNITY EMPLOYERS

Mr. Craig Kupferberg, Superintendent

EMPLOYMENT APPLICATION FOR ACESC NON-CERTIFIED STAFF

Date: _____ E-mail Address: _____

Name _____
Last First Middle

Present Address: _____
Street Address City, State, Zip Phone

Permanent Address: _____
(If different from above) Street Address City, State, Zip Phone

Experience: (Begin with most recent)

Name of Business/Organization	Position	Dates of Service	Supervisor Name and Contact Number

Educational History or Training: (Start with high school and list all colleges attended. If you have not graduated, please list degree and date anticipated)

School Name	Location	Major/Course of Study	Dates	Degree
High School Attended:				
Colleges/Universities:				

References: List persons who have first-hand knowledge of your professional training, experience, and character.

Name	Complete Address	Telephone	Position

You may attach a separate sheet giving any additional information which would help evaluate you for a position.

This application will be placed on file for consideration when vacancies occur. It should be complete and accurate in every detail. If you are employed, it will be necessary for you to furnish the Allen County ESC with an original transcript and a copy of your certificate/license, if applicable.

As a potential candidate for employment with the Allen County ESC, you are hereby notified that a satisfactory Federal and Ohio criminal records check is a precondition for employment.

ANY PERSON WHO KNOWINGLY MAKES A FALSE STATEMENT IS GUILTY OF FALSIFICATION UNDER SECTION 2921.13 OF THE REVISED CODE, WHICH IS A MISDEMEANOR OF THE FIRST DEGREE.

My signature below authorizes the school district to conduct any investigation necessary to determine my qualifications for employment, and authorizes release of information in connection with this application. I certify that I have made true, correct and complete responses on this application, and that to do otherwise is reason not to employ or to discharge if I am employed by any district.

Signature of Applicant _____ Date _____