

# Carlisle Local Schools

724 Fairview Drive • Warren County • Carlisle, Ohio 45005



**CARLISLE LOCAL SCHOOLS  
TEACHING APPLICATION**

# CARLISLE LOCAL SCHOOLS TEACHING APPLICATION

Personal Data

Name \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_

Address (Home) \_\_\_\_\_

Address (Present) \_\_\_\_\_

Phone (Home) \_\_\_\_\_ Phone (Present) \_\_\_\_\_

Certificates Held \_\_\_\_\_ Social Security No. \_\_\_\_\_

\_\_\_\_\_ Military Service \_\_\_\_\_

Professional Training:

PREPARATION	NAME OF SCHOOL	DATES ATTENDED	GRADUATION DATE	DEGREE
High School				
College or University				
Postgraduate				

Undergraduate Training:

Majors	Semester Hours	Minors	Semester Hours	Total No. of Semester Hours	
				Undergraduate	Graduate

**PROFESSIONAL EXPERIENCE: (Include Student Teaching)**

School	County	State	Dates	Grades and Subjects

Total Years Taught: \_\_\_\_\_



## APPLICANT'S CONSENT TO BACKGROUND INVESTIGATION

Ohio law requires boards of education to conduct a criminal record check of any applicant who is receiving final consideration for a position involving the care, custody and control of school children. Further, a board of education must be able to communicate freely with the persons listed as references by the applicant, as well as other persons and organizations who may have knowledge of the qualifications and fitness of the applicant for the position.

By your signature below, you agree to:

- 1) Permit the board of education to order a criminal records check through the Ohio Bureau of Criminal Identification and Investigation;
- 2) Provide fingerprint impressions upon request;
- 3) Authorize the board of education to make inquiries of past employers and other persons and entities, whether listed among your references or not, for the purpose of determining your qualifications and fitness for the position.

The completion of this document is required for further consideration of your application.

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Applicant

Any material misrepresented on this form constitutes sufficient cause for rejection of the applicant, and for termination at any time during employment

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Date

**OTHER DATA REQUIRED FOR EMPLOYMENT:**

Copy of Teaching Certificates  
Certified Copies of Transcripts  
Resumé

**PLEASE RETURN APPLICATION TO:**

SUPERINTENDENT'S OFFICE  
CARLISLE LOCAL SCHOOL DISTRICT  
724 FAIRVIEW DRIVE  
CARLISLE, OHIO  
45005

CARLISLE LOCAL SCHOOLS IS AN EQUAL OPPORTUNITY EMPLOYER