

# TIFFIN CITY SCHOOLS

244 S. MONROE STREET, TIFFIN, OH 44883  
 PHONE 419.447.2515 – FAX 419.448.5202  
 WWW.TIFFIN.K12.OH.US

CHECK POSITION FOR WHICH YOU ARE APPLYING	
<input type="checkbox"/>	ACCOUNT CLERK
<input type="checkbox"/>	BUS DRIVER
<input type="checkbox"/>	CUSTODIAN
<input type="checkbox"/>	MAINTENANCE
<input type="checkbox"/>	NIGHT SWEEPER
<input type="checkbox"/>	PARAPROFESSIONAL (EDUCATIONAL AIDE)
<input type="checkbox"/>	SECRETARY

## SUPPORT STAFF APPLICATION

DATE: \_\_\_\_\_

### PERSONAL DATA (PLEASE PRINT)

NAME: \_\_\_\_\_

STREET ADDRESS: \_\_\_\_\_

PHONE NUMBER: \_\_\_\_\_

CITY, STATE AND ZIP CODE: \_\_\_\_\_

CELL PHONE NUMBER: \_\_\_\_\_

ARE YOU CURRENTLY EMPLOYED?  YES  NO

MAY WE CONTACT YOUR PRESENT EMPLOYER:  YES  NO

HAVE YOU BEEN CONVICTED OF A FELONY WITHIN THE LAST SEVEN YEARS?  YES  NO

IF YES, PLEASE EXPLAIN: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

HAVE YOU BEEN DISMISSED OR ASKED TO RESIGN FROM ANY POSITION?  YES  NO

IF YES, PLEASE EXPLAIN: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

### EDUCATION

NAME AND ADDRESS OF SCHOOL	COURSE OF STUDY	YEARS COMPLETED	DIPLOMA/DEGREE
HIGH SCHOOL			
COLLEGE			

DESCRIBE ANY SPECIALIZED TRAINING SKILLS YOU HAVE ACQUIRED:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

# EMPLOYMENT EXPERIENCE

EMPLOYER AND ADDRESS	DATES EMPLOYED		PHONE NUMBER
	FROM	TO	
JOB TITLE			
WORK PERFORMED	REASON FOR LEAVING		
EMPLOYER AND ADDRESS	DATES EMPLOYED		PHONE NUMBER
	FROM	TO	
JOB TITLE			
WORK PERFORMED	REASON FOR LEAVING		
EMPLOYER AND ADDRESS	DATES EMPLOYED		PHONE NUMBER
	FROM	TO	
JOB TITLE			
WORK PERFORMED	REASON FOR LEAVING		

# REFERENCES

NAME	ADDRESS	PHONE NUMBER

I HEREBY AUTHORIZE THE TIFFIN CITY SCHOOLS TO OBTAIN ALL DATA NEEDED TO SUPPORT THIS APPLICATION FROM MY FORMER EMPLOYER(S). TO THE BEST OF MY KNOWLEDGE ALL INFORMATION FURNISHED IN CONNECTIONS WITH THIS APPLICATION IS TRUE AND ACCURATE. I FURTHER RECOGNIZE THAT, SHOULD THE EMPLOYER DISCOVER THAT I HAVE FALSIFIED ANY SUCH INFORMATION, I WILL NOT BE HIRED, OR IF ALREADY HIRED, WILL BE SUBJECT TO TERMINATION FROM EMPLOYMENT ON THAT GROUND.

APPLICANT'S SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

IT IS THE POLICY OF THE TIFFIN CITY BOARD OF EDUCATION THAT THE BEST-QUALIFIED APPLICANT SHALL BE SELECTED FOR EACH POSITION WITHOUT REGARD TO RACE, COLOR, RELIGION, NATIONAL ORIGIN, AGE, SEX OR MARITAL STATUS.

