

TIFFIN CITY SCHOOLS

TEACHING APPLICATION

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

FOR OFFICE USE ONLY				

DATE: _____

PERSONAL DATA

NAME:	E-MAIL ADDRESS
PRIMARY STREET ADDRESS:	PRIMARY PHONE NUMBER:
PRIMARY CITY, STATE, AND ZIP CODE:	PRIMARY CELL PHONE NUMBER:
NAME OF SECONDARY CONTACT PERSON:	SECONDARY PHONE NUMBER:
SECONDARY STREET ADDRESS:	
SECONDARY CITY, STATE, AND ZIP CODE:	

TEACHING PREFERENCE AND COMPETENCIES

INDICATE 1ST, 2ND, 3RD, AND 4TH PREFERENCE OF GRADE LEVELS:

<input type="checkbox"/> GRADES K-3	<input type="checkbox"/> GRADES 4-6	<input type="checkbox"/> GRADES 7-8	<input type="checkbox"/> GRADES 9-12
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POSITION PREFERRED: (PLEASE INDICATE SUBJECT AND/OR GRADE LEVEL)

1 ST CHOICE	
2 ND CHOICE	
3 RD CHOICE	

LIST OTHER SUBJECTS YOU ARE QUALIFIED TO TEACH: (THIS MAY INCLUDE AREAS OF EXPERTISE, BUT NOT NECESSARILY AREAS IN WHICH YOU ARE CERTIFIED/LICENSED.)

LIST ANY ACTIVITIES YOU ARE WILLING TO DIRECT, I.E., PLAYS, DEBATE, SCHOOL CLUBS, ETC.:

LIST ANY SPORTS YOU ARE WILLING TO COACH, I.E., INTRAMURALS, VOLLEYBALL, FOOTBALL, ETC.:

INDICATE PREFERENCE(S) FOR ASSIGNMENT: (CHECK ALL THAT APPLY)

REGULAR SUBSTITUTE TUTOR SUMMER SCHOOL HOME INSTRUCTION

DATE YOU ARE AVAILABLE TO START TEACHING:

CERTIFICATION

*SUBMIT A COPY OF ALL OHIO TEACHING AND ADMINISTRATIVE CERTIFICATES/LICENSES WITH THIS APPLICATION.
 (IF LICENSE IS PENDING, INDICATE EXPECTED DATE OF ISSUANCE.)*

NAME OF OHIO TEACHING CERTIFICATES/LICENSES	DATE ISSUED	DATE OF EXPIRATION	CERTIFICATE/LICENSE NUMBER	SUBJECTS OR GRADE ON CERTIFICATES/LICENSES

ACADEMIC PREPARATION FOR TEACHING

LIST MOST CURRENT EDUCATION FIRST:

NAME AND LOCATION OF INSTITUTION	YEARS COMPLETED	DEGREES EARNED AND DATES	MAJOR/MINOR	SEMESTER HOURS BEYOND GRADUATION	
				COMPLETED	IN PROCESS

STUDENT TEACHING

LIST STUDENT TEACHING EXPERIENCE:

NAME OF SCHOOL CITY, STATE, AND ZIP CODE	COOPERATING TEACHER/PHONE	GRADE /SUBJECT TAUGHT	DATES

TEACHING EXPERIENCE

LIST ALL CONTRACTED POSITIONS YOU HAVE HELD AS A CERTIFIED/LICENSED TEACHER/ADMINISTRATOR. LIST CHRONOLOGICALLY, WITH THE MOST RECENT POSITIONS FIRST. IN OHIO, 120 OR MORE DAYS' EXPERIENCE IN THE SAME SCHOOL YEAR EQUALS ONE YEAR.

NAME OF SCHOOL CITY, STATE, AND ZIP CODE	PRINCIPAL'S NAME AND PHONE NUMBER	GRADES, SUBJECTS TAUGHT AND RELATED ASSIGNMENTS	DATES		TOTAL YEARS
			FROM	TO	

ARE YOU PRESENTLY UNDER CONTRACT? () YES () NO

IF YES, WITH WHOM? _____
SCHOOL DISTRICT
ADDRESS

HAVE YOU BEEN EMPLOYED UNDER A CONTINUING CONTRACT IN OHIO? () YES () NO

CONTINUING CONTRACT GRANTED BY _____ ON _____
SCHOOL SYSTEM
DATE

HAVE YOU EVER BEEN DISCHARGED OR REQUESTED TO RESIGN FROM A TEACHING OR ADMINISTRATIVE POSITION?
 () YES () NO IF YES, PLEASE EXPLAIN:

HAVE YOU EVER BEEN INTERVIEWED FOR A POSITION IN THE TIFFIN CITY SCHOOLS? (DO NOT CHECK "YES" IF INTERVIEW WAS CONDUCTED ON A COLLEGE CAMPUS.) () YES () NO

WHAT I WANT YOU TO KNOW ABOUT ME AS A TEACHER

THIS SECTION IS DESIGNED TO PROVIDE YOU WITH AN OPPORTUNITY TO SHARE SOME OF YOUR EXPERIENCES AND THOUGHTS ABOUT TEACHING. PLEASE RESPOND TO EACH ITEM IN THE SPACE PROVIDED. SINCE FOURTEEN OPPORTUNITIES HAVE BEEN PROVIDED TO YOU, BRIEF CANDID RESPONSES ARE ENCOURAGED.

1. I WOULD LIKE TO SHARE THIS SIGNIFICANT EVENT IN WHICH I WAS HELPING A STUDENT WITH A DIFFICULT PROBLEM (BRIEFLY DESCRIBE THE EVENT, ITS SIGNIFICANCE TO YOU, AND THE OUTCOME.)

2. WHAT DO YOU WANT TO ACCOMPLISH AS A TEACHER? _____

3. HOW WILL YOU ASCERTAIN THE ATTITUDE AND FEELINGS STUDENTS HAVE ABOUT YOUR CLASS? _____

4. AN EXPERIENCED TEACHER OFFERS YOU THE FOLLOWING ADVICE: "WHEN YOU ARE TEACHING, BE SURE TO COMMAND THE RESPECT OF YOUR STUDENTS IMMEDIATELY AND ALL WILL GO WELL." HOW DO YOU FEEL ABOUT THIS? _____

5. HOW DO YOU DECIDE WHAT SHOULD BE TAUGHT IN YOUR CLASS? _____

6. A PARENT COMES TO YOU AND COMPLAINS THAT WHAT YOU ARE TEACHING HIS/HER CHILD IS IRRELEVANT TO THE CHILD'S NEEDS. HOW WOULD YOU RESPOND? _____

7. WHAT DO YOU THINK WILL (DOES) PROVIDE THE GREATEST PLEASURE IN TEACHING? _____

8. WHEN YOU HAVE SOME FREE TIME, WHAT DO YOU ENJOY DOING THE MOST? _____

9. HOW WOULD YOU IDENTIFY YOUR STUDENTS' TALENTS AND STRENGTHS? _____

10. WOULD YOU RATHER TRY A LOT OF WAY-OUT TEACHING STRATEGIES OR WOULD YOU RATHER TRY TO PERFECT THE APPROACHES THAT WORK BEST FOR YOU? EXPLAIN. _____

WHAT I WANT YOU TO KNOW ABOUT ME AS A TEACHER (CONTINUED)

11. DO YOU LIKE TO TEACH WITH AN OVERALL PLAN IN MIND FOR THE YEAR, OR WOULD YOU RATHER JUST TEACH SOME INTERESTING THINGS AND LET THE PROCESS DETERMINE THE RESULTS? EXPLAIN YOUR POSITION.

12. A STUDENT IS DOING POORLY IN YOUR CLASS. YOU TALK TO HER, AND SHE TELLS YOU THAT SHE CONSIDERS YOU TO BE THE POOREST TEACHER SHE HAS EVER MET. WHAT WOULD YOU DO? _____

13. IF THERE WERE ABSOLUTELY NO RESTRICTIONS PLACED UPON YOU, WHAT WOULD YOU MOST LIKE TO DO IN LIFE? _____

14. DISCUSS THE MOST IMPORTANT THINGS YOU DO TO MAINTAIN DISCIPLINE IN THE CLASSROOM. _____

OTHER EXPERIENCES

LIST OTHER WORK EXPERIENCES, WHICH YOU BELIEVE HAVE BEEN VALUABLE TO YOUR CAREER:

NOTIFICATION

I HAVE BEEN AN OHIO RESIDENT CONTINUOUSLY FOR THE PAST FIVE (5) YEARS. () YES () NO

I ACKNOWLEDGE BEING INFORMED THAT, AS A PRECONDITION TO EMPLOYMENT IN THE POSITION FOR WHICH I AM APPLYING, I MUST, IN ACCORDANCE WITH OHIO LAW, PROVIDE A SET OF FINGERPRINTS AND SATISFACTORILY PASS A CRIMINAL RECORDS CHECK IF I COME UNDER FINAL CONSIDERATION FOR EMPLOYMENT. I RECOGNIZE THAT I WILL BE CHARGED FOR THE COST OF THE RECORDS CHECK, SUCH AMOUNT AS THE BUREAU OF CRIMINAL IDENTIFICATION AND INVESTIGATION AND THE FEDERAL BUREAU OF INVESTIGATION MAY CHARGE THE SCHOOL DISTRICT, AND THAT, UNLESS I PAY THE FEE, I WILL NOT BE CONSIDERED FOR EMPLOYMENT.

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 CONNECTION 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.

HAVE YOU EVER BEEN CONVICTED OF A FELONY, MISDEMEANOR OR ANY CRIME THAT MAY PREVENT ISSUANCE OF AN OHIO TEACHING AND/OR ADMINISTRATIVE CERTIFICATE/LICENSE? () YES () NO IF YES, PLEASE EXPLAIN:

APPLICANT'S SIGNATURE _____ DATE _____