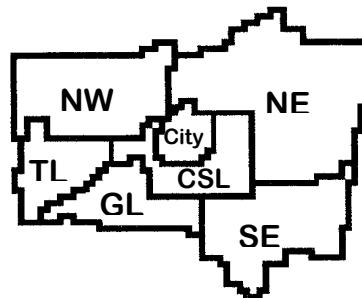


Administrator Application Information for Clark County Schools



CONTACT

Stacia A. Smith, Ph.D., NBCT
Clark County Educational Service Center
Garfield Building
25 West Pleasant Street
Springfield, Ohio 45506
(937) 325-7671

Dear Applicant:

Thank you for your interest in the Clark County Schools. Please complete the attached application form and return it to the Clark County Educational Service Center. Your application will be kept on file. If a superintendent requests a copy it will be sent to that district.

Your appointment for an employment interview should be made with the local district administrator responsible for interviewing prospective employees in each school district.

We will maintain your credential placement file in the Clark County Educational Service Center for access by local districts.

Please feel free to contact our office if you have questions.

Sincerely,

Stacia A. Smith, Ph.D., NBCT
Clark County Educational
Service Center

ksc

Enclosures

APPLICANTS, PLEASE NOTE:

I. The following districts will have access to this application:

- | | |
|--|---|
| 1. Clark-Shawnee Local,
Ms. Debbie Finkes, Superintendent
328-5378 | 4. Northwestern Local,
Mr. Anthony Orr, Superintendent
964-1318 |
| 2. Greenon Local,
Ms. Lori Lytle, Superintendent
328-5351 | 5. Southeastern Local,
Stacia A. Smith, Ph.D., NBCT,
Interim Superintendent
462-8388 |
| 3. Northeastern Local,
Mr. Rick Broderick, Superintendent
325-7615 | 6. Tecumseh Local,
Dr. Jim Gay, Superintendent
845-3576 |

II. Complete *all* sections of the application form. Do NOT leave the space blank,

Clark County Public Schools

Clark-Shawnee Local
Greenon Local
Northeastern Local

ADMINISTRATIVE APPLICATION

25 West Pleasant Street, Garfield Building
Springfield, OH 45506
(937) 325-7671

Northwestern Local
Southeastern Local
Tecumseh Local

EQUAL OPPORTUNITY EMPLOYERS

PLEASE WRITE LEGIBLY

This Application is for ALL Schools in the Clark County Schools System

Date _____ Social Security Number _____

Name _____
Last First Middle

Present Address _____ Phone () _____
Street/Road City/State Zip Code

Permanent Address _____ Phone () _____
Street/Road City/State Zip Code

Date Available to Accept Position _____

CHECK GRADE AND TYPE OF CERTIFICATE(S) YOU HOLD OR WILL HOLD BY JULY 1:

GRADE

- _____ Temporary
- _____ 4 Yr. Provisional
- _____ 8 Yr. Professional
- _____ Permanent
- _____ Other _____

TYPE OF CERTIFICATE(S)

- _____ Elementary Principal
- _____ High School Principal
- _____ Supervisor
- _____ Assistant Superintendent
- _____ Educational Administrative Specialist
- _____ Local Superintendent
- _____ Superintendent
- _____ Other _____

Position for which applying _____ Are you now under contract? _____

Have you ever been convicted of a felony? _____

EDUCATIONAL AND PROFESSIONAL TRAINING

Name of College or University	Location	Sem. Hrs. Cr.	Degree	Years Attended

TEACHING AND ADMINISTRATIVE EXPERIENCE (List Last Position First)

Name of School	Location	Position	Dates	No. of Months

REFERENCES: List three individuals who know you professionally --			
Name	Address	Telephone	Position
PROFESSIONAL ORGANIZATIONS: List your membership in educational organizations and offices held --			
EDUCATIONAL-RELATED ACTIVITIES: List other activities, honors, or chairmanships which you feel will help in evaluating your leadership ability.			

Please request that your college/university forward your credential file to our office. Also, you may include your personal vita/resumè and any additional information that you feel might be helpful in consideration for employment.

I affirm the facts set forth in this application are true and complete, and I understand that false statements or information withheld on this application shall be considered sufficient cause for dismissal. I hereby authorize the release of all information from previous employers, educational institutions, and records to the Clark County Educational Service Center. I also grant permission for a background search by the Clark County Sheriff's Department or any other law enforcement agency deemed necessary (a signature is required for employment consideration).

I voluntarily authorize the Clark County Educational Service Center to contact any references whose names I have submitted. I voluntarily release this School District and any of the persons providing information from any liability or legal claims relating to the use of information obtained.

READ CAREFULLY BEFORE SIGNING:

I agree that any claim or lawsuit relating to my service with the Clark County Educational Service Center or any Clark County School District must be filed no more than six (6) months after the date of the employment action that is the subject of the claim or lawsuit. I waive any statute of limitations to the contrary.

Signature: _____

NOTICE: It is the policy of this District that no candidate for a position in this District shall be discriminated against on the basis of race, color, religion, national origin or citizenship status, creed or ancestry, age, gender, marital status, non-disqualifying disability, height, or other protected categories.

In accordance with Federal law, any person employed by this District must provide evidence that s/he is eligible to work in the United States.

-----**NO NOT WRITE BELOW THIS LINE**-----
FOR OFFICE USE ONLY

Initials _____

4. As an elementary/high school/central office administrator, what would you want the school to be like?

5. What would be most rewarding to you as elementary/high school/central office administrator?

-----NO NOT WRITE BELOW THIS LINE-----