



**NOTICE**

When this application is submitted to the Avon Lake City Schools, it becomes public record and may be viewed by the public.

**AVON LAKE CITY SCHOOLS**

175 Avon Belden Road ♦ Avon Lake, Ohio 44012

**APPLICATION FOR EMPLOYMENT  
NON-TEACHING POSITION**

**MARK THE APPROPRIATE BOXES:**

- New Application
- Previous Application on File
- Former Employee of the School District

**DATE** \_\_\_\_\_

**Indicate position(s) desired for which you are qualified:**

- Bus Driver
- Custodial
- Food Service
- Maintenance
- Media
- Monitor
- Secretary
- Special Education Paraprofessional
- Other \_\_\_\_\_

**PERSONAL INFORMATION**

Name(Last)	(First)	(Middle)	Social Security Number
Home Address	City	State	Zip
Home Telephone ( ) ( ) ( )	Business Telephone ( ) ( ) ( )	May we contact you at work? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Have you reached your 18 <sup>th</sup> birthday?		<input type="checkbox"/> Yes	<input type="checkbox"/> No
Position Applying For	Date Available / /	<b>Are you interested in: (Check all that apply)</b> <input type="checkbox"/> Full-time <input type="checkbox"/> Summer (Seasonal) <input type="checkbox"/> Part-time <input type="checkbox"/> Substitute (On Call Basis)	
How were you referred to Avon Lake City Schools?			

**EDUCATION**

Type of School	Name and Location of School	Degree/Area of Study	Number of Years Attended	Graduated (Check One)
High School	Name _____ Address _____			<input type="checkbox"/> Yes <input type="checkbox"/> No
	City _____ State _____ Zip _____			
College	Name _____ Address _____			<input type="checkbox"/> Yes <input type="checkbox"/> No
	City _____ State _____ Zip _____			
Graduate School	Name _____ Address _____			<input type="checkbox"/> Yes <input type="checkbox"/> No
	City _____ State _____ Zip _____			
Other	Name _____ Address _____			<input type="checkbox"/> Yes <input type="checkbox"/> No
	City _____ State _____ Zip _____			



**ADDITIONAL SKILLS**

Other Skills/Experience/License/ Certificate Held: \_\_\_\_\_

**Complete the following: Only if applying for secretarial or library aide.**

What office machines can you operate? \_\_\_\_\_

Typing \_\_\_\_\_ (w.p.m. /5 minute test)      Shorthand: \_\_\_\_\_ (w.p.m. / 3 minute test)

Do you have working knowledge of computers?       Microsoft Word       Microsoft Excel       Power Point

**OTHER INFORMATION**

In the space below, provide any additional information you feel will provide an additional understanding of your qualifications. Your goals, objectives, philosophy, and other background factors are of special interest.

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**STATEMENT OF UNDERSTANDING**

**My signature below authorizes the school district to conduct a background investigation and authorizes release of information in connection with my application for employment. This investigation may include such information as criminal or civil convictions, driving records, previous employers, education institutions, personal references, professional references, and other appropriate sources. I waive my right of access to any such information, and without limitation hereby release the school division and the reference source from any liability in connection with its release or use. This release includes the sources cited above and specific examples as follows: the local Sheriff, the information from the Central Criminal Records Exchange of either data on all criminal convictions or certification that no data on criminal convictions are maintained, information from the Ohio or other State Department of Social Services Child Protective Services Unit and any locality to which they may refer for release of information pertaining to any findings of child abuse or neglect investigations involving me.**

**Furthermore, I certify that I have made true, correct and complete answers and statements on the application with the knowledge that they may be relied upon in considering my application. I understand that any omission or false statements made by me on this application, or any supplement to it, will be sufficient grounds for failure to employ or for my discharge should I become employed with the school district.**

**Signature of Applicant** \_\_\_\_\_ **Date** \_\_\_\_\_

The Avon Lake Board of Education does not discriminate on the basis of race, color, national origin, age, religion, political affiliation, disability, or sex in its educational programs or employment. No person shall be denied employment solely on the basis of any impairment, which is unrelated to the ability to engage in activities involved in the position or program for which application has been made.