



# Hardin-Houston Local School

5300 Houston Road, Houston, Ohio 45333

Larry Claypool  
Superintendent

Amy Ayers  
Treasurer

ph: (937) 295-3010 fx: (937) 295-3737

Sara Roseberry  
Elementary Principal

Ryan Maier  
High School Principal

## Application for Employment

Please complete this application and return to:

Hardin-Houston Local School  
Attn: Superintendent of School  
5300 Houston Road  
Houston, Ohio 45333

-or-

lclaypool@houston.k12.oh.us

### PERSONAL DATA

Social Security Number: \_\_\_\_\_

U.S. Citizenship:  Yes  No

LAST NAME

FIRST NAME

MIDDLE NAME

Address: \_\_\_\_\_

NUMBER AND STREET

CITY/STATE/ZIP

TELEPHONE NUMBER

Email: \_\_\_\_\_

What is your condition of health for the past two years? \_\_\_\_\_

Do you suffer from any of the following:  Vision Impairment  Hearing Impairment  
 Physical Disorder  Mental Disorder  
 Other \_\_\_\_\_

Number of missed work days last year: \_\_\_\_\_ Previous year: \_\_\_\_\_

Approximate number of days of accumulated sick leave (if applicable) \_\_\_\_\_

Present Position: \_\_\_\_\_ Salary/Wage: \_\_\_\_\_

List your responsibilities in your present position: \_\_\_\_\_  
\_\_\_\_\_

For what position are you applying? Please check below:

- Aide
- Secretarial
- Computer Technology
- Bus Driver
- Janitorial
- Coach
- Cook
- Maintenance
- Other \_\_\_\_\_

Date \_\_\_\_\_

Applicant's Name \_\_\_\_\_

(Last)

(First)

(Middle)

**COMMUNITY ACTIVITIES AND ORGANIZATIONS**

List any community activities and organizations that you participate in

1. \_\_\_\_\_ 4. \_\_\_\_\_  
 2. \_\_\_\_\_ 5. \_\_\_\_\_  
 3. \_\_\_\_\_ 6. \_\_\_\_\_

**EDUCATION**

Name of School	Location	Dates		Sem. Hrs. Earned <sup>1</sup>	Grade Point Average <sup>2</sup>	Date of Graduation	Degree Earned
		From	To				
High School Last Attended							
Colleges or Universities Attended							

**MILITARY SERVICE RECORD**

Induction Date	Discharge Date	Branch of Service	Length of Service		
			Yrs.	Mo.	Days

**EMPLOYMENT EXPERIENCE**

Years (Dates)	Employer	Address	Position	Full or Part-Time

**REFERENCES**

Name – Position	Address	Phone Number

May we contact the above listed references?  Yes  No

I authorize a complete criminal/traffic record check and I authorize that my record (if any) may be disclosed to the Hardin-Houston Local School District

I hereby acknowledge that the information I provided on this application is true to the best of my knowledge.

I hereby attest that I am not prevented from lawfully becoming employed in the United State because of Visa or Immigration Status. (Proof of citizenship or immigration will be required upon employment)

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

Please Note: No Acknowledgment of this application will be forthcoming.  
 Unless reactivated by written request, this application will be destroyed two years from date of filing.

**THIS SCHOOL DISTRICT IS AN EQUAL OPPORTUNITY EMPLOYER**