

**PUTNAM COUNTY EDUCATIONAL SERVICE CENTER**

124 Putnam Parkway

Ottawa OH 45875

419-523-5951

**NON-CERTIFIED EMPLOYMENT APPLICATION**

APPLICANT'S NAME \_\_\_\_\_

POSITION DESIRED \_\_\_\_\_

PERMANENT ADDRESS \_\_\_\_\_

PHONE 1 \_\_\_\_\_ PHONE 2 \_\_\_\_\_

**NOTICE REGARDING BACKGROUND SEARCH:** As required by law, if I am under final consideration for employment, I hereby grant permission for a criminal background report by the Ohio Bureau of Criminal Identification and Investigation (BCII) and the Federal Bureau of Investigation (FBI) and for the release of any information obtained to the administration and board of education of the prospective employing district. Failure to do so may result in the applicant not being considered for employment.

The applicant can be made responsible for the cost of obtaining these background reports (currently \$56.00).

APPLICANT'S SIGNATURE \_\_\_\_\_

DATE \_\_\_\_\_

The Putnam County Educational Service Center is an Equal Opportunity Employer in compliance with Title VI of the 1964 Civil Rights Act, Titles VII and IX of The Educational Amendments, and Section 504 of the Rehabilitation Act, which prohibits discrimination because of RACE, COLOR, NATIONAL ORIGIN, HANDICAP, (AGE, SEX and/or RELIGION where applicable), MILITARY STATUS, ANCESTRY in any facet of our operation except where such discrimination is bona fide, documented business necessity.

(3-15-2017)

## COLLEGE EDUCATION (if any)

### 1. Name of School and Location

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Degree Earned and Date Awarded \_\_\_\_\_

Major/Minor \_\_\_\_\_

### 2. Name of School and Location

Degree Earned and Date Awarded \_\_\_\_\_

Major/Minor \_\_\_\_\_

## EXPERIENCE (List most recent first)

### 1. Employer

Job Title/ Duties \_\_\_\_\_

Dates Employed/ Reason for Leaving \_\_\_\_\_

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### 2. Employer

Job Title/ Duties \_\_\_\_\_

Dates Employed/ Reason for Leaving \_\_\_\_\_

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### 3. Employer

Job Title/ Duties \_\_\_\_\_

Dates Employed/ Reason for Leaving \_\_\_\_\_

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## **REFEREN CES**

List persons knowledgeable of your qualifications for this position. Include especially administrators under whom you have worked.

1. **Name** \_\_\_\_\_

Position \_\_\_\_\_

Telephone No. \_\_\_\_\_ No. of Years Known \_\_\_\_\_

2. **Name** \_\_\_\_\_

Position \_\_\_\_\_

Telephone No. \_\_\_\_\_ No. of Years Known \_\_\_\_\_

3. **Name** \_\_\_\_\_

Position \_\_\_\_\_

Telephone No. \_\_\_\_\_ No. of Years Known \_\_\_\_\_

**Add here any additional information that will assist us in arriving at a true estimate of your skills/qualifications.**

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**Why do you want to work for the Putnam County ESC?**

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