

**ALLEN COUNTY SCHOOLS**  
An Equal Opportunity Employer

Return To: Cindy Endsley, Superintendent  
Spencerville Local School District  
600 School Street  
Spencerville, OH 45887

Date \_\_\_\_\_

Name \_\_\_\_\_  
Last First Middle

Permanent Address \_\_\_\_\_

Telephone Number \_\_\_\_\_

Present Address \_\_\_\_\_

Telephone Number \_\_\_\_\_

Position Applied For: \_\_\_\_\_ Elementary Teacher \_\_\_\_\_ Secondary Teacher  
\_\_\_\_\_ Administration \_\_\_\_\_ Middle School Teacher \_\_\_\_\_ Special \_\_\_\_\_  
(Please specify)

List grades or subjects in order of preference for which you are applying.

1. \_\_\_\_\_ 2. \_\_\_\_\_ 3. \_\_\_\_\_

Co-Curricular activities that you can direct: \_\_\_\_\_

Indicate school district preference, or if none, check all.

Allen East \_\_\_\_\_ Bath \_\_\_\_\_ Elida \_\_\_\_\_ Perry \_\_\_\_\_ Shawnee \_\_\_\_\_ Spencerville \_\_\_\_\_

Certification:

State \_\_\_\_\_  
Effective \_\_\_\_\_

Check Type Applicable:

\_\_\_\_\_ 4 Year Provisional  
\_\_\_\_\_ 8 Year Professional  
\_\_\_\_\_ Provisional Special  
\_\_\_\_\_ Other \_\_\_\_\_

Grades or Subjects on Certificate: \_\_\_\_\_

Date of Availability: \_\_\_\_\_ Are you under Contract? \_\_\_\_\_

TEACHING EXPERIENCE - Total Years \_\_\_\_\_ (Year is minimum of 120 days.)

SCHOOL	DATES	GRADES/SUBJECTS	ADMINISTRATION

Military Service \_\_\_\_\_ Total Years \_\_\_\_\_  
(Dates)

WORK EXPERIENCE OTHER THAN TEACHING (RECENT):

Firm or Institution	Location	Dates

PROFESSIONAL TRAINING:

	NAME/LOCATION	MAJOR/MINOR	DATES	DEGREE
HIGH SCHOOL				
UNIVERSITY/COLLEGE				
GRADUATE WORK				

Student Teaching \_\_\_\_\_ Grades/ \_\_\_\_\_ Supervising  
 School District \_\_\_\_\_ Subjects \_\_\_\_\_ Teacher \_\_\_\_\_

REFERENCES - List below persons who have first hand knowledge of your character, personality, scholarship and teaching ability.

Name	Address	Position

Address of Placement Office where current credentials may be obtained.

\_\_\_\_\_

You may attach a separate sheet giving any additional information which would help evaluate you for this position.

This application will be placed on file for consideration when vacancies occur. It should be complete and accurate in every detail. Mail your application to the address stamped on the front upper hand corner. Applications mailed to the Allen County Educational Service Center will be forwarded to each of the Local Schools at their request.

A personal interview with the Local Superintendent is required. Applicants will be notified of the proper time to appear for interviews.

When you are employed, it will be necessary for you to furnish the County Office with two transcripts and your original certificate. The County Office will forward copies of transcripts and certificate to the employing school.

CERTIFICATION OF APPLICANT: I hereby authorize Allen County Public Schools to obtain from my former employers all data needed to support this application. I hereby authorize Allen County Public Schools to obtain from the references listed above any information needed to support this application.

I certify that the information given in this application is true to the best of my knowledge, and that I am or will be certified to teach all subjects and grades listed.

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

\_\_\_\_\_  
 Date