

**FAIRFIELD UNION LOCAL SCHOOL DISTRICT
6417 CINCINNATI-ZANESVILLE ROAD NE
LANCASTER, OHIO 43130**

APPLICATION FOR ADMINISTRATOR

PERSONAL INFORMATION

DATE OF APPLICATION:

Last Name	First	Middle	Social Security Number
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Street Address	City	State	Zip
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Telephone Numbers/Email Address

Home Phone: _____ Work Phone: _____

Email Address: _____

Are you currently under contract to another district? Yes No

If you answered yes, when does the contract expire? _____

Date available for employment? _____

Current base salary? (Not including fringe benefits)	Base salary expectations? (Not including fringe benefits)
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Do you hold a valid Administrator Certificate/License? Yes No

Type of Certificate/License _____

Certificate/License Number _____

Have you ever been discharged or requested to resign from a teaching or administrative position? Yes No

Have you ever had a teaching certificate/license revoked? Yes No

Note: Candidates are subject to a criminal background check.
If yes to any of the above questions, please explain separate from this application.

MILITARY EXPERIENCE

Branch of Service?	Years?	From?	To?
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Present Military Affiliation? None Reserve/NGUS (Active) Reserve (Inactive)

CURRENT EMPLOYMENT INFORMATION

Name of District	Your Title
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Have you ever held a continuing contract in Ohio? Yes No

If yes, what district? _____ Date Granted _____

EDUCATIONAL HISTORY - PLEASE INCLUDE ON RESUME

PROFESSIONAL EXPERIENCE - PLEASE INCLUDE ON RESUME

LIST OTHER WORK EXPERIENCE

LIST OTHER ACTIVITIES/SERVICE

WHY ARE YOU INTERESTED IN THIS POSITION?

DESCRIBE TWO OF YOUR MAJOR CAREER ACCOMPLISHMENTS

DESCRIBE A DISCOURAGING OR CHALLENGING SITUATION IN YOUR EDUCATIONAL CAREER AND HOW YOU OVERCAME THE SITUATION

DESCRIBE HOW YOU WOULD PROVIDE LEADERSHIP TO THE SCHOOL STAFF

ON WHAT BASIS WOULD YOU JUDGE YOUR SUCCESS AS A PRINCIPAL?

DESCRIBE YOUR TRAINING AND EXPERIENCES IN CURRICULUM AND ASSESSMENT

DESCRIBE YOUR EXPERIENCE AND ABILITY TO MANAGE DATA FOR THE PURPOSE OF ACADEMIC EXCELLENCE

REFERENCES

Please list below the names and addresses of five persons who can speak of your professional competency and character.

Name	Type of Acquaintance
Street Address, City, State, Zip Code	Phone Home Business
Name	Type of Acquaintance
Street Address, City, State, Zip Code	Phone Home Business
Name	Type of Acquaintance
Street Address, City, State, Zip Code	Phone Home Business
Name	Type of Acquaintance
Street Address, City, State, Zip Code	Phone Home Business
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Street Address, City, State, Zip Code	Phone Home Business

May representatives of the Fairfield Union Schools contact your current employer? Yes No

Applicant's Signature:

I certify that the information in this application is true and accurate to the best of my knowledge and belief.

I hereby authorize representatives of the Fairfield Union Schools to conduct such investigations and to obtain such records (including criminal and credit records) as necessary. I understand that giving false or misleading information, either oral or written, may result in denial or termination of my employment.

I understand that Ohio public records laws may require disclosure of applicant information by the school district.

Signature of Applicant

Date

If any of your educational or employment records are under other than the above name, please provide other names in the space above.

SUBMIT ALL APPLICATION MATERIALS TO:

**Superintendent
Fairfield Union Local School District
6417 Cincinnati-Zanesville Road NE
Lancaster, Ohio 43130**

The Fairfield Union Local School District Is An Equal Opportunity Employer