

www.lakewoodrecreation.com



Grounds _____
Programs _____

*if yes, please explain:

EDUCATION

	Elementary	High School	College/ University	Graduate/ Professional
Name of School and Location				
Years Completed		9 10 11 12	1 2 3 4	1 2 3 4
Diploma/Degree				
Describe course of study (major/minor)				
Describe specialized training and skills				

WORK EXPERIENCE

List most recent experience first. Include any military experience and list all employment experiences. Use an additional sheet if necessary. Exclude organization names, which indicate race, color, religion, sex or national origin. Please start with most recent.

Employer	Dates Employed		Work Performed
	From	To	
Address	Hourly Rate/Salary		
	Start	Final	
Phone Number	Job Title		Supervisor
	Start	Final	

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	From	To	
Address	Hourly Rate/Salary		
	Start	Final	
Phone Number	Job Title		Supervisor
	Start	Final	

THIS STATEMENT MUST BE HANDWRITTEN

Use the space below for a statement that tells us other factors we should know in considering you for a position in the Lakewood City School System. You may wish to include any special skills or experiences that have not been covered elsewhere in this application.

REFERENCES

Give name, address and telephone number for three (3) references:

	<i>Name</i>	<i>Title</i>	<i>Address</i>	<i>Telephone</i>
1				
2				
3				

STATEMENT AND RELEASE FOR BACKGROUND INVESTIGATION

My signature below authorizes the school district to conduct a criminal record check 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 and educational 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 district 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, information from the Central Criminal Record 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 Protection 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 this application in the knowledge that they may be relied upon in considering my application, and I understand that any omission, false answered 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
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EQUAL OPPORTUNITY EMPLOYER