



RIVER VIEW LOCAL SCHOOL DISTRICT

Office of the Superintendent
26496 SR 60 North, Warsaw, Ohio 43844
(740) 824-3521
www.river-view.k12.oh.us

Application for Employment Classified Staff

Paraprofessional

Date _____

I am interested in:

- Full-time Part-time Substitute

Name _____ Home Phone _____

Cell Phone _____

Address _____ City _____ State _____ Zip _____

If employed, you must be able to complete a background check with the Bureau of Criminal Investigation and the Federal Bureau of Investigation. Are you willing to do so? yes no

Educational Background

High School _____

College _____ Degree _____ Semester Hours _____

Vocational School _____

Technical School _____

Qualifications

What experiences, skills, qualifications, or activities would help qualify you for this position?

Do you have experience working with children?

Do you have an Educational Aide Certificate from the Ohio Department of Education? yes no
expiration date _____

(If no certificate, you must follow the steps from the Ohio Department of Education to obtain this certificate to be employed by River View Local School District.)

Employment References (previous employers)

Employer _____ Position held _____
Address _____ Phone _____
Dates worked _____ to _____ Supervisor _____
Reason for Leaving _____

Employer _____ Position held _____
Address _____ Phone _____
Dates worked _____ to _____ Supervisor _____
Reason for Leaving _____

Employer _____ Position held _____
Address _____ Phone _____
Dates worked _____ to _____ Supervisor _____
Reason for Leaving _____

Personal References:

Name _____ Position _____
Address _____ Phone _____

Name _____ Position _____
Address _____ Phone _____

Name _____ Position _____
Address _____ Phone _____

Military Service:

Branch of Military _____ Training & Duties _____

I hereby authorize the River View Local School District to obtain all data needed to support this application. I certify that all information on this application is true and complete to the best of my knowledge and I understand that my withholding or falsifying information on this application is grounds for dismissal.

(Applicant's Signature)

The River View Local School District Board of Education provides equal employment opportunities to all people regardless of race, color, national origin, sex or handicap.

For Office Use Only	Application Record
Application Filed _____	
Interview Date _____	