



Norwayne Local Schools

350 South Main Street
 Creston, OH 44217
 Phone 330-435-6382
 Fax 330-435-4633

Substitute Application

Date _____

Name _____ / _____
Last First Middle Other names which may appear on official documents (e.g. maiden)

Present Address _____ Tel. No. _____
Area Code & Number

Permanent Address _____ Tel. No. _____
Area Code & Number

Position Applied For _____

Training	School or Institution Name	Course	Diploma Or Degree	Year of Graduation	Dates of Attendance From - To	Total Time Spent (yrs)	Semester Hours Credit
High School							
Jr. College College(s)							
Graduate Work							
Special							

<p>Describe Specialized Training, Apprenticeship, skills, and Extra Curricular Activities</p>	
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Employment Experience

(List your employment from your most current to your earliest employment. If needed, use a separate sheet of paper.)

↓ Dates Employed: ↓

Employer _____ Phone _____ From _____ To _____

Job Title _____ Work Performed _____

Reason for Leaving _____ Immediate Supervisor _____

Employer _____ Phone _____ From _____ To _____

Job Title _____ Work Performed _____

Reason for Leaving _____ Immediate Supervisor _____

Employer _____ Phone _____ From _____ To _____

Job Title _____ Work Performed _____

Reason for Leaving _____ Immediate Supervisor _____

OTHER LEGAL

READ CAREFULLY

All applications for employment are subject to a criminal records check through the Bureau of Criminal Identification and Investigation and Federal Bureau of Investigation pursuant to the authority of Section 3319.32 and Section 109.57, Revised Code.

Please see the following list of disqualifying crimes:

- | | | |
|--|---|---|
| Aggravated Murder | Corruption of a Minor | Illegal Use of a Minor in Nudity- |
| Murder | Gross Sexual Imposition | Oriented Material/Performance |
| Voluntary Manslaughter | Sexual Imposition | Aggravated Robbery |
| Involuntary Manslaughter | Importuning | Robbery |
| Felonious Assault | Voyeurism | Aggravated Burglary |
| Aggravated Assault | Public Indecency | Burglary |
| Assault | Felonious Sexual Penetration | Abortion Without Informed Consent |
| Failing to Provide for Functionally
Impaired person | Compelling Prostitution | Endangering Children |
| Aggravated Menacing | Promoting Prostitution | Domestic Violence |
| Patient Abuse or Neglect | Procuring | Carrying Concealed Weapons |
| Kidnapping | Prostitution | Having Weapons While Under Disability |
| Abduction | Disseminating Matter Harmful to
Juveniles | Improperly Discharging Firearm at
or into Habitation or School |
| Child Stealing | Pandering Obscenity | Corrupting Another with Drugs |
| Criminal Child Enticement | Pandering Obscenity Involving a Minor | Drug Trafficking |
| Rape | Pandering Sexually Oriented
Material Involving a Minor | Alteration of Food |
| Sexual Battery | | |

I have read the above list of disqualifying crimes _____

Employee Signature

Give name, address and phone number of three references not related to you.

State any additional information you feel may be helpful to us in considering your application.