

**ROOTSTOWN LOCAL SCHOOLS
ADMINISTRATIVE APPLICATION**

**ADMINISTRATIVE
CERTIFICATION _____**

**PLEASE PRINT OR TYPE
PERSONAL DATA**

DATE _____

Name _____
Last First Middle Initial

Permanent Address _____ Phone _____
City State Zip

Social Security Number _____ Years of Administration _____

EDUCATIONAL DATA

<u>School or College</u>	<u>Location</u>	<u>Diploma/Degree</u>	<u>Yr. Graduated</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Undergraduate Major _____ Minor _____ Graduate Major _____ Minor _____

CERTIFICATION

Please list the types of Ohio Administrative Certificates you currently hold:

Administrative area of preference _____

ADMINISTRATIVE EXPERIENCE

<u>Name & Location of School</u>	<u>Assignment</u>	<u>Dates (Last position first)</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

OTHER EXPERIENCE

<u>Employer & Location</u>	<u>Type of Work</u>	<u>Dates</u>

Please list below the specific areas of your previous administrative assignments:

Interests & Hobbies: _____

Professional or Community Organizations: _____

REFERENCES: Please list at least two (2) references who have first hand knowledge of your performance as an administrator:

<u>Name</u>	<u>Address-Telephone Number</u>	<u>Position</u>

When are you available for an interview? _____

When would you be available to begin this assignment? _____

Completed application should be returned to:

Rootstown Local Schools
Board of Education-Superintendent Search
Attn: Mr. Robert C. Dunn, Board President
4140 State Route 44
Rootstown, OH 44272

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