

MERCER COUNTY EDUCATIONAL SERVICE CENTER

441 East Market Street, Celina, OH 45822 Phone: (419) 586-6628 Fax: (419) 586-3377

(Application for Certified Positions)



Serving: Ft. Recovery Marion Parkway St. Henry Celina Coldwater  
Local Local Local Cons. Local City Ex. Village

\_\_\_\_\_  
 (Last) (First) (Middle) (Social Security No.) (Date)

Home Address \_\_\_\_\_ Phone \_\_\_\_\_

Present Address \_\_\_\_\_ Phone \_\_\_\_\_

High School \_\_\_\_\_  
 (Name) (City) (State)

College or University

Undergraduate College \_\_\_\_\_ Degree \_\_\_\_\_ Year Granted \_\_\_\_\_ Semester Hrs. \_\_\_\_\_

Graduate College \_\_\_\_\_ Degree \_\_\_\_\_ Year Granted \_\_\_\_\_ Semester Hrs. \_\_\_\_\_

Graduate College \_\_\_\_\_ Degree \_\_\_\_\_ Year Granted \_\_\_\_\_ Semester Hrs. \_\_\_\_\_

Please list the certificates or licenses you hold below:

Type (Area)	State	Year Issued	Expiration Year
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Please list below the positions you are interested and qualified to fill:

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Please list below your teaching and administrative experience starting with your most recent:

From	To	Employer's Name	Address	Position
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Please list below three references familiar with your work experience and personal character:

Name	Address	Phone	Agency	Position
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

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

Applicant's Signature \_\_\_\_\_ Date \_\_\_\_\_

*Applications will remain on file for two years from the date listed above.*

Applicants are considered for all positions without regard to sex, religion, color, age, national origin, size, handicap, race, ancestry, citizenship status, or status as a Vietnam era or special disabled veteran.

**An Equal Opportunity Employer**