

Greenville City School District
ATHLETIC PERSONNEL APPLICATION

(Employment requires a successful FBI & BCII background check at your expense)

Last Name: _____ First Name: _____ Middle Name: _____

Address: _____
 Street City State Zip

 Email Address Home Phone Cell Phone

Person to Contact: *(if not available at the above address)*

 Street City State Zip Phone

List any name other than the one above that you have used or by which you have been known:

Last Name: _____ First Name: _____ Middle Name: _____

Coaching Position applying for: _____

Current Work Experience

Employer	Position	Date Began	Date Ended

Coaching Experience

Employer (School System)	Title or Position	Year	Win/Loss Record

List Interscholastic Sports Participated in as a High School Student (please do not specify the gender of the sport or any affiliation with race, color, national origin, sex, disability, ancestry or age):

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List Interscholastic Sports Participated in as a College Student (please do not specify the gender of the sport or any affiliation with race, color, national origin, sex, disability, ancestry or age):

References: (Do Not Use Relatives)

Name	Position	Address	Phone Number

Have you previously applied or been employed in the Greenville City School District? Yes No

If yes, When? _____

Have you lived in Ohio for the past 5 years? Yes No

Are you willing to take a physical exam? Yes No

Are you legally eligible to work in the U.S.? Yes No

I understand and agree that nothing stated in this employment application, in any other document, or in any interview is intended to create an employment contract between the Greenville City School District and myself for either employment or for the providing of any benefit. Likewise, no such contracts are intended to be created from the mere granting of an interview. No promises or guarantees regarding employment have been made to me, and I understand that no such promise or guarantee is binding upon the Greenville City School District unless made in writing by the Superintendent of Greenville City Schools, and then only for the time specified.

I hereby certify that the above information, to the best of my knowledge, is true, accurate and complete. Any falsification of this record will be sufficient cause for disqualification and, if employed, discharge. Any person who knowingly makes a false statement is guilty of falsification under section 2921.13 of the revised code, which is a misdemeanor of the first degree. Furthermore, it is understood that this application becomes the property of the Board Education, which reserves the right to accept or reject it. I authorize the verification of all references and information contained in this application and regard this information as confidential, not to be revealed to me. I also authorize the Board of Education or its agents to conduct such investigation and to obtain such records (including criminal and credit records) as the Board deems necessary. I also agree to indemnify and hold the Greenville City School District harmless from any liability which might result from conducting such investigations.

Signature of Applicant

Date