



APPLICATION FOR SUPERINTENDENT

Application Process

Qualified individuals are encouraged to apply.

Please submit:

1. A cover letter emphasizing qualifications and reasons for interest;
2. A completed employment application;
3. An up-to-date resume;
4. Three (3) reference letters from associates or board members who can speak to candidate's qualifications and work experience;
5. A copy of current Ohio Superintendent License or evidence that one can be obtained.

***Completed application materials
should be mailed or emailed to:***

Mr. Todd Stahr, Treasurer/CFO
Pickaway-Ross Career & Technology Center
895 Crouse Chapel Road
Chillicothe, Ohio 45601

For additional information please contact Mr. Stahr at 740/642-1275
or via email at Todd.Stahr@pickawayross.com

Application Deadline 3:00 p.m. November 6, 2020

APPLICATION FOR SUPERINTENDENT

Pickaway-Ross Joint Vocational School District

(Please type or print)

Personal Information:

Last Name	First	Middle Initial	Date of Application
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Street Address

City	State	Zip Code	Contact Information: Home Phone Work Phone Email
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Are you presently under contract to another district? Yes No
If yes, when does the contract expire?

Date available for employment?

Current base salary? <i>(Not including fringe benefits)</i>	Base salary expectations? <i>(Not including fringe benefits)</i>
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Do you hold a valid Ohio Superintendent's Certificate/License? Yes No

Expiration Date: _____ Certificate/license number: _____

Other certifications/licensure:

Have you ever been convicted of a felony? Yes No

If yes, please explain on a separate sheet of paper.

Note: Candidates are subject to a criminal background check.

Have you ever been dismissed or non-renewed? Yes No

If so, with whom and why? _____

Do you currently possess licensure/certifications in another state? Yes No

State _____

Have you ever had a teaching certificate/license revoked? Yes No

Military Experience:

Branch of Service	Years	From	To
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Present Military affiliation None Reserve/NGUS (active) Reserve (inactive)

Current School District Information:

Name of District		Title/Position Held	
Enrollment (ADM)	Building Budget	Total Number of Employees	

Professional/Work References:

Please list below the names and addresses of five (5) persons who can speak of your professional competency and character. Include at least three (3) names of professional colleagues.

Name	Type of Acquaintance	
Street Address, City, State, ZIP Code	Phone Home:	Business:
Name	Type of Acquaintance	
Street Address, City, State, ZIP Code	Phone Home:	Business:
Name	Type of Acquaintance	
Street Address, City, State, ZIP Code	Phone Home:	Business:
Name	Type of Acquaintance	
Street Address, City, State, ZIP Code	Phone Home:	Business:
Name	Type of Acquaintance	
Street Address, City, State, ZIP Code	Phone Home:	Business:

Does the board of education or its agents have your permission to contact the above named persons? Yes No

Does the board of education or its agents have your permission to contact your current employer? Yes No

Why are you interested in this Superintendency? (if needed, please attach additional pages)

Identify two (2) major accomplishments in your last position: (if needed, please attach additional pages)

Educational History:

School Name	Location (City, State)	Major Course or Subject	Dates Attended		Graduated		Degree
			From	To	Yes	No	
High School							
College (list all attended)							

Professional Experience:

Starting with present or most recent, list all previous employers. If more space is required, please continue on a separate sheet. You may attach resume, but complete application as well.

No. of Years	Dates		Position Title	School District/ Organization, Address	Reason for Leaving
	From	To			

Other work experience and achievements valuable to your career:

Outside activities:

Identify two (2) projects that did not get accomplished despite your best efforts? Please explain why they did not get accomplished:

Applicant's Signature:

I certify that the information in this application is true and accurate to the best of my knowledge and belief. I understand that if it is not, I may be eliminated from consideration for this job. If, after being hired, falsehoods or omissions are discovered in my application or resume, I understand that my employment may be terminated.

I certify that Ohio Public Records Law mandates the disclosure of certain applicant information to individuals or entities making request.

I hereby authorize the Board and its agents to conduct such investigations and to obtain such records as the Board determines necessary. I authorize my previous employers, school, and persons named as references to give any information they may have regarding my employment together with information they may have regarding me, whether or not it is in their records.

I understand that completion of this application does not guarantee an interview or offer of employment for the position of Superintendent. I also understand that the successful candidate for the position may be asked to provide any additional documents required by law to hold employment in a public school district.

Signature of Applicant

Date

If any of your educational or employment records are under other than the above name, please provide other names below.

Other names

The Pickaway-Ross JVSD Board of Education does not discriminate on the basis of race, color, national origin, sex (including sexual orientation and transgender identity), disability, age, religion, military status, ancestry, genetic information (collectively, "Protected Classes"), or any other legally protected characteristic, in its programs and activities, including employment opportunities.