Howland Local School District

Classified Employment Application / An Equal Opportunity Employer

Personal Information

Field	Applicant Response
Full Legal Name	
Street Address	
City, State, Zip Code	
Primary Telephone	
Email Address	
Social Security Number	
Date Available	
Are you a citizen of the United States?	Yes No
Have you ever been employed by Howland Local Schools? *If yes, when?*	Yes: _____ No
How did you hear about this position?	

Position(s) Desired

Please check all classified job interest areas for which you are applying or qualified:

- ☐ Secretary
- ☐ Educational Assistant
- ☐ Library Assistant
- ☐ Nurse Assistant
- ☐ Technology Assistant
- ☐ Janitor
- ☐ Maintenance
- ☐ Cook / Cashier
- ☐ Lunch Monitor
- ☐ Bus Driver

Desired Employment Status:

- ☐ Full-Time
- ☐ Part-Time
- ☐ Substitute / On-Call

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Skills and Experience Checklist

Check any of the following areas in which you are skilled or have experience:

- ☐ typing
- ☐ computers
- ☐ office machines
- ☐ cooking
- ☐ nursing
- ☐ bus/truck driving
- ☐ electrical
- ☐ floor care
- ☐ professional lawn care
- ☐ building care
- ☐ carpentry
- ☐ plumbing
- ☐ auto mechanics
- ☐ masonry
- ☐ trucks/heavy equipment

Educational Background

Education Level	Institution Name	Years Attended	Did You Graduate?	Major / Field of Study
High School				
College/University				
Trade/Vocational				

Employment History

Please list your last three employers, starting with your current or most recent position.

Employer Name & Location	Position / Title	Dates (MM/YY - MM/YY)	Supervisor	May we contact supervisor? (Yes/No)	Reason for Leaving

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Professional References

Please provide three professional references who can attest to your work performance and character.

Full Name	Title / Company	Relationship	Telephone Number

Applicant Authorization & Statement

I certify that my answers are true and complete to the best of my knowledge. If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.

Applicant Signature: _____ Date: _____

Ohio Department of Public Safety
Division of Homeland Security
http://www.homelandsecurity.ohio.gov

PUBLIC EMPLOYMENT

In accordance with section 2909.34 of the Ohio Revised Code

DECLARATION REGARDING MATERIAL ASSISTANCE/NONASSISTANCE TO A TERRORIST ORGANIZATION

This form serves as a declaration of the provision of material assistance to a terrorist organization or organization that supports terrorism as identified by the U.S. Department of State Terrorist Exclusion List (see the Ohio Homeland Security Division website for a reference copy of the Terrorist Exclusion List).

Any answer of "yes" to any question, or the failure to answer "no" to any question on this declaration shall serve as a disclosure that material assistance to an organization identified on the U.S. Department of State Terrorist Exclusion List has been provided. Failure to disclose the provision of material assistance to such an organization or knowingly making false statements regarding material assistance to such an organization is a felony of the fifth degree.

For the purposes of this declaration, "material support or resources" means currency, payment instruments, other financial securities, funds, transfer of funds, and financial services that are in excess of one hundred dollars, as well as communications, lodging, training, safe houses, false documentation or identification, communications equipment, facilities, weapons, lethal substances, explosives, personnel, transportation, and other physical assets, except medicine or religious materials.

LAST NAME	FIRST NAME	MIDDLE INITIAL

HOME ADDRESS			
CITY	**STATE**	**ZIP**	**COUNTY**
HOME PHONE	**WORK PHONE**		

DECLARATION

In accordance with division (A)(2)(b) of section 2909.32 of the Ohio Revised Code

For each question, indicate either "yes," or "no" in the space provided. Responses must be truthful to the best of your knowledge.

1. Are you a member of an organization on the U.S. Department of State Terrorist Exclusion List?
   ☐ Yes ☐ No

2. Have you used any position of prominence you have with any country to persuade others to support an organization on the U.S. Department of State Terrorist Exclusion List?
   ☐ Yes ☐ No

3. Have you knowingly solicited funds or other things of value for an organization on the U.S. Department of State Terrorist Exclusion List?
   ☐ Yes ☐ No

PUBLIC EMPLOYMENT - CONTINUED

4. Have you solicited any individual for membership in an organization on the U.S. Department of State Terrorist Exclusion List?
   ☐ Yes ☐ No

5. Have you committed an act that you know, or reasonably should have known, affords "material support or resources" to an organization on the U.S. Department of State Terrorist Exclusion List?
   ☐ Yes ☐ No

6. Have you hired or compensated a person you knew to be a member of an organization on the U.S. Department of State Terrorist Exclusion List, or a person you knew to be engaged in planning, assisting, or carrying out an act of terrorism?
   ☐ Yes ☐ No

In the event of a denial of public employment due to a positive indication that material assistance has been provided to a terrorist organization, or an organization that supports terrorism as identified by the U.S. Department of State Terrorist Exclusion List, a review of the denial may be requested. The request must be sent to the Ohio Department of Public Safety's Division of Homeland Security. The request forms and instructions for filing can be found on the Ohio Homeland Security Division website.

CERTIFICATION

I hereby certify that the answers I have made to all of the questions on this declaration are true to the best of my knowledge. I understand that if this declaration is not completed in its entirety, it will not be processed and I will be automatically disqualified. I understand that I am responsible for the correctness of this declaration. I understand that failure to disclose the provision of material assistance to an organization identified on the U.S. Department of State Terrorist Exclusion List, or knowingly making false statements regarding material assistance to such an organization is a felony of the fifth degree. I understand that any answer of "yes" to any question, or the failure to answer "no" to any question on this declaration shall serve as a disclosure that material assistance to an organization identified on the U.S. Department of State Terrorist Exclusion List has been provided by myself or my organization.

X _____ _____

Signature Date