



List below the places where you have taught:

SCHOOL & LOCATION	GRADE	SUBJECTS	DATES

Experience with children (other than teaching) \_\_\_\_\_

Check any of the following activities which you are qualified to coach or direct. Use a double check to show actual coaching or directing experience.

- |  |                                     |                                       |  |
|--|-------------------------------------|---------------------------------------|--|
| <input type="checkbox"/> Athletic Director | <input type="checkbox"/> Gymnastics | <input type="checkbox"/> Volleyball   | <input type="checkbox"/> Dramatics       |
| <input type="checkbox"/> Baseball          | <input type="checkbox"/> Soccer     | <input type="checkbox"/> Wrestling    | <input type="checkbox"/> Marching Band   |
| <input type="checkbox"/> Basketball        | <input type="checkbox"/> Softball   | <input type="checkbox"/> Cheerleading | <input type="checkbox"/> Drill Team      |
| <input type="checkbox"/> Cross Country     | <input type="checkbox"/> Swimming   | <input type="checkbox"/> Intramurals  | <input type="checkbox"/> Class Sponsor   |
| <input type="checkbox"/> Football          | <input type="checkbox"/> Tennis     | <input type="checkbox"/> Newspaper    | <input type="checkbox"/> Student Council |
| <input type="checkbox"/> Golf              | <input type="checkbox"/> Track      | <input type="checkbox"/> Yearbook     | <input type="checkbox"/> Other _____     |

**NON-TEACHING WORK EXPERIENCE:**

BUSINESS	LOCATION	KIND OF WORK PERFORMED	LENGTH OF SERVICE

**EDUCATIONAL PREPARATION:**

High School \_\_\_\_\_  
(Name and Location) (Dates Attended) (Date of Graduation)

Undergraduate School:	Dates Attended	Major	Degree	Date Earned or Expected
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Teaching Minor: \_\_\_\_\_

Graduate School:

_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

(Quarter hours are reduced by 2/3 to equal semester hours) . . . . TOTAL SEMESTER HOURS \_\_\_\_\_

**REFERENCES:** List at least **THREE** professional references.

EXPERIENCED TEACHERS MUST INCLUDE THE NAMES OF PRINCIPALS AND SUPERINTENDENTS, FOR WHOM THEY HAVE WORKED, INCLUDING THE MOST RECENT SUPERVISOR OR ADMINISTRATOR. BEGINNING TEACHERS MUST INCLUDE THE NAME OF THEIR COOPERATING TEACHER.

NOTE: IF YOU HAVE A PLACEMENT FILE, YOU MAY REQUEST THAT THIS PLACEMENT FOLDER BE USED IN THE PLACE OF THE REFERENCE SECTION LISTED, BUT ONLY IF THE PLACEMENT FOLDER CONTAINS AT LEAST THREE PROFESSIONAL REFERENCES INCLUDING YOUR MOST RECENT SUPERVISOR OR ADMINISTRATOR.

A. Professional References

Name	Street, City, State, Zip	Position or Occupation	Phone
1.			
2.			
3.			

B. Personal References

Name	Street, City, State, Zip	Position or Occupation	Phone
1.			
2.			

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**DIRECTIONS:** In your own handwriting, please answer the following questions.

1. What do you want to accomplish as a teacher? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

2. An experienced teacher offers you the following advice: "When you are teaching, be sure to command the respect of your students immediately and all will go well." How do you feel about this?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

3. A parent comes to you and complains that what you are teaching his child is irrelevant to the child's needs.





**Lebanon City Schools**  
**700 Holbrook Avenue, Lebanon, Ohio 45036-1648**  
**Phone (513) 934-5770 - Fax (513) 932-5906**

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## **Instructions for TeacherInsight Interview**

We would like to invite you to take the TeacherInsight on-line survey. This multiple choice interview will tell us more about your beliefs and attitudes about teaching and learning. Please follow these simple steps:

1. Go to this website to take the interview:  
<https://gx.gallup.com/teacherinsight.gx>
2. Enter our district code **3782**.
3. Enter your Social Security Number.
4. Begin the assessment.
5. The questions are timed. Once you move on from a question, you are not allowed to go back.
6. The entire assessment takes approximately ½ hour.
7. Your score will be sent to our office.



**LEBANON CITY SCHOOLS**  
**Employee Network and Internet Acceptable Use and Safety Agreement**

The primary purpose of the network is to provide resources to enhance and support educational instruction through the collaboration and exchange of information. Use of the Internet is a privilege not a right. The District's Internet connection is provided for educational purposes only. Unauthorized and inappropriate use may result in disciplinary action and/or termination. It is widely known that the internet has resources available that are inappropriate for a school setting. To ensure proper use of the district and/or voice-video-data network resources, the following rules and regulations apply to all staff members:

- A. The use of the network is a privilege which may be revoked by the district at any time and for any reason. Appropriate reasons for revoking privileges include, but are not limited to, the altering of the system software, the placing of unauthorized information, accessing materials which are inappropriate for the school setting, computer viruses or harmful programs on or through the computer system in either public or private files or messages.
- B. Any misuse of the account will result in suspension of the account privileges and/or other disciplinary action determined by the district. Misuses shall include, but not be limited to:
  - (1) misrepresenting other users on the network;
  - (2) disrupting the operation of the network through abuse of the hardware or software;
  - (3) malicious use of the network through hate mail, harassment, profanity, vulgar statements, or discriminatory remarks;
  - (4) interfering with others' use of the network;
  - (5) illegal installation, copying, or use of licensed copyrighted software.
- C. Employees will be liable to pay the cost or fee of any file, shareware, or software transferred, whether intentional or accidental, without written permission of the District Technology Director, Written request forms are available in the office.
- D. Employees accessing the Internet through the school's computers assume personal responsibility and liability, both civil and criminal, for unauthorized or inappropriate use of the Internet.

The Board has the right to monitor, review, and inspect any directories, files, and/or messages residing on or sent using the school district's computers/networks. Messages relating to or in support of illegal activities will be reported to the appropriate authorities.

I have read, understand and agree to abide by the network resource rules and regulations. Should I commit any violation or in any way abuse or misuse my access privilege on the computer network, I understand and agree that my access privilege may be revoked and disciplinary action, up to and including termination of employment, may be taken against me.

\_\_\_\_\_

Date

\_\_\_\_\_

Signature of Employee

\_\_\_\_\_

Last Four of Social Security #

\_\_\_\_\_

Printed Name of Employee