

CALHOUN COUNTY SCHOOL DISTRICT

119 W. MAIN
PITTSBORO, MISSISSIPPI 38951
Telephone 662-412-3152

EMPLOYMENT APPLICATION

Date

<input type="checkbox"/> Substitute Teacher <input type="checkbox"/> Teacher Aide <input type="checkbox"/> Bookkeeper <input type="checkbox"/> Secretary <input type="checkbox"/> Bus Driver	<input type="checkbox"/> Cafeteria Supervisor <input type="checkbox"/> Cafeteria Manager <input type="checkbox"/> Cafeteria Worker <input type="checkbox"/> Clerk <input type="checkbox"/> Assistant Teacher (Requires AA degree or 48 college hours or passing score on Work Keys)	<input type="checkbox"/> Maintenance Supervisor <input type="checkbox"/> Maintenance Worker <input type="checkbox"/> Custodian <input type="checkbox"/> Other _____ (Specify)
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NAME _____
 LAST FIRST MIDDLE SOCIAL SECURITY # _____

PRESENT ADDRESS _____
 STREET CITY STATE ZIP CODE

 UNTIL _____
 DATE AREA CODE TELEPHONE

PERMANENT ADDRESS _____
 STREET CITY STATE ZIP CODE

 AREA CODE TELEPHONE

EDUCATION (circle one or more)

High School Years Completed	1	2	College Years Completed	1	2	3	G.E.D.	Degree(s)
	3	4		4	5		Yes No	B.S. B.A. Master's

Do you hold a Mississippi Teacher Certificate? Yes No

Endorsements _____
 (Class) (Type) Major Teaching Areas

Do You Hold These Certificates? (circle one)

	Yes	No	Valid Period	
			From	To
School Bus Driver Certificate	_____	_____	_____	_____
School Food Service Supervisor Certificate	_____	_____	_____	_____
School Food Service Manager Certificate	_____	_____	_____	_____

Have you previously been employed by Calhoun County Schools? Yes No

Are you presently employed? Yes / No (Present employer may be contacted as reference? Yes / No)

If yes, with whom? _____ Type of work _____

List the office machines you are able to operate and describe your computer skills: _____

Date Available for Employment: _____

List School in which you are applying for employment (1st, 2nd, and 3rd choice)

BRUCE _____ CALHOUN CITY _____ VARDAMAN _____

Calhoun County School District does not discriminate on the basis of sex, race, religion, color, national origin, age or handicap.

Include High School, College, Graduate, Post Graduate Work in Order Taken	Dates Attended Month - Year	Degree Received	Major Subject	Sem. Hrs. in Major	Minor Subject	Sem. Hrs. in Minor
_____	From _____ 19____ To _____ 19____					
_____	From _____ 19____ To _____ 19____					
_____	From _____ 19____ To _____ 19____					

EXPERIENCE

Name and Complete Address of Employer	Period of Service Exact Month, Year	No. of Months	Position	Reason for Leaving
_____	From _____ 19____ To _____ 19____			
_____	From _____ 19____ To _____ 19____			
_____	From _____ 19____ To _____ 19____			

Have you ever been asked to resign, been discharged, or failed to be reemployed? Yes _____ No _____

If yes, give details _____

Have you ever been convicted of an offense other than a misdemeanor? Yes _____ No _____

If yes, explain _____

Are you a citizen of the United States? Yes _____ No _____

List any additional information you wish to submit _____

REFERENCES

List the name, position, and address of four (4) individuals as your references. Include supervisors under whom you have worked.
Please do not list relatives as references.

NAME	OFFICIAL POSITION	ADDRESS (STREET, CITY, STATE & ZIP)	PHONE NUMBER

READ CAREFULLY AND SIGN THE FOLLOWING STATEMENT:

By my signature, I attest that the information contained in this application is true and represents me accurately. I authorize the above references to be contacted and employment history to be checked. I agree to a criminal background check and understand that this criminal background check of all new employees is performed at the employee's expense. If employed, I agree to abide by all policies approved by the School Board and will cooperate fully with inservice programs for improvement. I understand that this application will remain in the active file for a period of one year and will then be classified as inactive unless I notify the Superintendent's office in writing to keep the application current. I am aware that the facilities of Calhoun County School District are smoke/tobacco free. I am aware that positions covered by this application are deemed at-will.

Date _____

Signature _____

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