

# CORINTH SCHOOL DISTRICT APPLICATION FOR EMPLOYMENT

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Please print, complete and return to:  
Edward Lee Childress, Ed. D., Superintendent  
Corinth School District  
1204 North Harper Road  
Corinth, Mississippi 38834  
(662) 287-2425

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Note: The applicant should exercise the greatest care in preparing this application.  
Information given herein becomes a legal part of the contract in case of election.  
Please do not omit any items.

**Date:** \_\_\_\_\_

**Name:** \_\_\_\_\_ **Social Security Number:** \_\_\_\_\_

**Present Address:** \_\_\_\_\_

\_\_\_\_\_ **ZipCode:** \_\_\_\_\_

**Until** \_\_\_\_\_ **20** \_\_\_\_\_ **Phone:** \_\_\_\_\_

**Permanent Address:** \_\_\_\_\_

\_\_\_\_\_ **ZipCode:** \_\_\_\_\_

**FOR POSITION AS:** \_\_\_\_\_

**Elementary:** \_\_\_\_\_ **Secondary:** \_\_\_\_\_  
(Level) (Subjects)

**Special Education:** \_\_\_\_\_ **Other:** \_\_\_\_\_  
(Areas)

**LICENSE: Submit a copy of your License. An official transcript may be required prior to employment.**

**Class:** \_\_\_\_\_ **Validity Period:** \_\_\_\_\_  
(A, AA, AAA, AAAA)

**Endorsements:** \_\_\_\_\_

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**\*\*For Office Use only\*\***

**Date Application Received:** \_\_\_\_\_

Interviewer Initials	Interview Date	Comments
_____	_____	_____
_____	_____	_____
_____	_____	_____

## EDUCATION

Name of School and Location (Include High School, College, Graduate Work and Summer Sessions in Order Taken)	Dates	Semester Hours Credit	Degree or Diploma	MAJOR SUBJECT and Semester Hours Credit	MINOR SUBJECT and Semester Hours Credit

## EXPERIENCE

Name of School and Location or other Work Experience	Dates	Number of Years	NATURE OF WORK
<b>TOTAL Number of Years</b>			

**NOTE: APPLICANT WILL NOT WRITE IN SPACES BELOW**

## ASSIGNMENTS

	Dates	School Year	Salary	Position Assigned	School
<b>Elected</b>					

# PERSONAL INFORMATION

1. Have you taken the PRAXIS? \_\_\_\_\_ Yes \_\_\_\_\_ No
2. PRAXIS Scores:  
Core Academic Skills: \_\_\_\_\_ Principles of Learning and Teaching: \_\_\_\_\_ Specialty Area: \_\_\_\_\_
3. Are you willing to perform all the responsibilities, including extracurricular, that are normally a part of the position for which you are making application?  
\_\_\_\_\_ Yes \_\_\_\_\_ No
4. Have you ever incurred an industrial injury?  
\_\_\_\_\_ Yes \_\_\_\_\_ No

If yes, nature of condition and dates: \_\_\_\_\_

5. Have you received any compensation for work related injury?  
\_\_\_\_\_ Yes \_\_\_\_\_ No

If yes, please explain: \_\_\_\_\_

6. Do you have any physical or mental impairment(s) that would adversely affect your ability to perform the job tasks for which you are applying?  
\_\_\_\_\_ Yes \_\_\_\_\_ No

If yes, please describe: \_\_\_\_\_

7. Present Salary? \_\_\_\_\_ Expected Salary? \_\_\_\_\_

8. When could you begin work? \_\_\_\_\_

9. List Achievements and Honors:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

10. References: These should be persons qualified to give information to show your fitness for the position you seek. Please include Superintendents and Principals under whom you have taught.

Name	Address/Contact Information	Occupation

