



NESHOBA COUNTY SCHOOL DISTRICT

PROFESSIONAL EMPLOYMENT APPLICATION

580 East Main Street
Philadelphia, Mississippi 39350

Please Attach Copy of Teacher License and Resume

PLEASE CHECK:
 Instructional
 Administrative

TODAY'S DATE: _____

NAME: _____
 (Last) (First) (Middle/Maiden)

PRESENT ADDRESS: _____

(City) (State) (Zip Code)

PERMANENT ADDRESS: _____

(City) (State) (Zip Code)

TELEPHONE: _____
 (Area Code) (Phone Number)

POSITIONS PREFERRED: In order of preference, list position, grade level(s), and subject in which you are or will be certified in the State of Mississippi.

1. _____
2. _____
3. _____

| SCHOOLS | NAME AND ADDRESS OF INSTITUTIONS | DATES ATTENDED | DEGREE | G.P.A. | AREA OF SPECIALIZATION |
|---------------|----------------------------------|----------------|--------|--------|------------------------|
| High School | | | | | |
| College | | | | | |
| Graduate | | | | | |
| Post Graduate | | | | | |

Mississippi Certificate # _____ Class _____ Type _____ Exp. Date _____

Areas of Current Endorsement (A) _____ (B) _____

Subjects with 18 or more hours (A) _____ (B) _____

REFERENCES:

List the names of four employment references, including principals (present and/or last), supervisors, and superintendents. Beginning teachers must have a reference from the directing teacher and principal of school where internship was completed as well as from the college supervisor of student teaching. Please give correct addresses which are legible and complete.

| NAME | ADDRESS | POSITION | TELEPHONE |
|------|---------|----------|-----------|
| | | | |
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| | | | |
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"It is the policy of the Neshoba County School District not to discriminate on the basis of race, color, religion, sex, national origin, sexual orientation, age, or disability in its educational programs or employment policies."

Dates of Student Teaching: _____ Grade or Subject _____

School Where You Did Your Student Teaching: _____

Supervision Teacher: _____ Address: _____

Cooperating Teacher: _____ Address: _____

Past Employment Record: (Start with present position; including student teaching if you've completed within the last five years).

| SCHOOL OR FIRM and COMPLETE ADDRESS | DATES | NUMBER OF MONTHS | POSITION, GRADE and SUBJECT | REASON FOR LEAVING |
|-------------------------------------|-------|------------------|-----------------------------|--------------------|
| | | | | |
| | | | | |
| | | | | |
| | | | | |

List professional activities and honors before and since graduation: _____

What position of leadership or responsibility have you held in school/ work? _____

Are you presently under contract with any school system? _____

What school system? _____ Until _____

What is the earliest you could begin work in the NCSD? _____

Have you ever been asked to resign, been discharged, or failed to be reemployed for a teaching or administrative position? _____ if yes, give details _____

Have you ever been convicted of an offense other than a misdemeanor? _____

If yes, explain _____

READ CAREFULLY

I hereby release the Neshoba County School District or any correspondent in regard to my application from any and all liability for damages, or whatever nature, on account of furnishing information requested which is to be used in determining my fitness for the position for which I am making application.

I also agree that any letters sent in connection with my application are privileged, and the Neshoba County School District shall not be required to furnish me a copy of them nor shall any who send a letter to the Neshoba County School District in connection with my application be required to furnish a copy of their reply.

I hereby certify that the information included in this application, to the best of my knowledge, is true, accurate, and complete. Any misrepresentation or willful omission of facts shall be sufficient cause of disqualification of this application and records become property of the District, which reserves the right to accept or reject it. I further agree to observe all rules, regulations, and policies of the District now in force and effect or as they may change during my employment if I am employed by the District. I understand that this application will remain in the active file only for a period of one year and will be classified as inactive unless I notify the personnel office in writing to keep the application current.

If employed, I agree to abide by all the policies approved by the Board of Trustees and will cooperate fully with in-service programs for professional improvement.

Signature of Applicant

Date

APPLICATION INSTRUCTIONS – CERTIFIED PERSONNEL

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580 East Main Street
Philadelphia, Mississippi 39302

To be considered an official applicant to the Neshoba County School District, the following must be completed:

1. Application Form – Completed, dated, and signed.
2. Mississippi Certification –
3. Transcripts of all college and/or university work received.
4. Resume' must be attached to your application.
5. Interviews – After all of the above information has been evaluated, the top applicants will be invited for personal interviews before a person or before a screening committee.
6. Status of Application – Because of the large number of application received and because of the time and fiscal constraints, you may not be contacted unless you are invited for an interview. Your understanding would be appreciated. Applications will remain in the active file only for the school year for which applicant is applying and then they will be classified as inactive unless the applicant notifies the Personnel Office in writing to keep the application current.
7. IF EMPLOYED, you must furnish the Neshoba County School District with the following:
(A) Mississippi Certification; (B) Verification of Prior Teaching Exp. (if applicable); and
(C) Copy of Driver's License (D) Copy of Social Security Card.

Your application is greatly appreciated. Thank you for your interest in the
Neshoba County School District.

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