

Please print, complete and return to:

Prentiss County School District  
P.O. Box 179; 105 North College Street  
Booneville, MS 38829  
Telephone: 662-728-4911 Fax: 662-728-2000

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

**EMPLOYMENT APPLICATION**

NAME: \_\_\_\_\_ DATE: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

SOCIAL SECURITY NUMBER: \_\_\_\_\_ PHONE NUMBER: \_\_\_\_\_

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

ELEMENTARY: \_\_\_\_\_ SECONDARY: \_\_\_\_\_  
(Level) (Subjects)

SPECIAL EDUCATION: \_\_\_\_\_ OTHER: \_\_\_\_\_  
(Areas)

**CERTIFICATE**

CLASS: \_\_\_\_\_ VALIDATION PERIOD: \_\_\_\_\_  
(A, AA, AAA, AAAA)

ENDORSEMENTS: \_\_\_\_\_

**NATIONAL BOARD**

CERTIFICATE NUMBER: \_\_\_\_\_ VALIDATION PERIOD: \_\_\_\_\_

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

**APPLICATION VALID ONE (1) YEAR FROM DATE OF RECEIPT**

Office Use Only

Date Received: \_\_\_\_\_

### EDUCATION

NAMES OF SCHOOLS ATTENDED <small>(High School, College, Graduate, Etc)</small>	DATES	SEMESTER HRS/ CREDIT	DEGREE/ DIPLOMA	MAJOR SUBJECTS AND HRS. CREDIT

### EXPERIENCE

NAME AND LOCATION	DATES	NUMBER OF YEARS	NATURE OF WORK SPECIFY GRADES AND SUBJECTS TAUGHT
<b>TOTAL NUMBER OF YEARS</b>			

1. Have you passed all required Praxis for your endorsement area? \_\_\_\_\_

2. Are you able to perform all the responsibilities, including extracurricular, that are normally part of the position for which you are making application? \_\_\_\_\_

Explain: \_\_\_\_\_

3. Please indicate any of the following which you are able and willing to sponsor or direct: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

4. Please indicate any of the following which you are able and willing to coach or direct: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

5. When would you be able to begin to work? \_\_\_\_\_

6. List achievements and honors: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

7. References: These should be persons qualified to give any information to show your fitness for the position you seek. Please include superintendents and principals under whom you have taught.

NAME	ADDRESS	POSITION
------	---------	----------

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

8. Attachments: Please submit a copy of your certificate(s). A transcript of all college transcripts will be required prior to employment.

Within the space provided, in your own handwriting, please explain why you chose to be a teacher and why you would like to teach or work in the Prentiss County School District.

I agree to the following:

- child abuse registry check
- criminal records background check via fingerprint card
- payment of \$40.00 fee for fingerprinting and the FBI
- national criminal history record check

NOTE: The information given on this application is true and correct to the best of my knowledge. I understand that any false information may invalidate the applicant's employment contract.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_