



NORTH TIPPAH SCHOOL DISTRICT



20821, Falkner, MS 38629
Phone: 662-837-8450 Fax: 662-837-8455

Application for Certified Staff

Name: _____ Date: _____

Address: _____ Zip: _____ Email: _____

S.S. # _____ Telephone: _____

Position applying for _____

Teaching Certificate you now hold:

Class _____ Validation Period _____
A, AA, AAA

Areas of endorsement _____

Position Desired _____
(Must be certified for the position for which you are applying)

Check Grade Level Desired:

___ K ___ 1 ___ 2 ___ 3 ___ 4 ___ 5 ___ 6 ___ 7 ___ 8 ___ 9

___ 10 ___ 11 ___ 12 ___ Special Education

Subject Preferred if 9-12 _____
(1st Choice) (2nd Choice) (3rd Choice)

The North Tippah School District does not discriminate on the basis of race, sex, religion, handicap or national origin.

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 item.

EDUCATION: (Every Applicant must attach a copy of his/her high school diploma or GED.)

Name of School and Location - (Begin with High School, then College, Graduate Work. Etc.)	From		To		Degree or Diploma and Dates	Major
	Mo.	Yr.	Mo.	Yr.		

EXPERIENCE: List all teaching experience-attach additional sheet if needed.

Name and Complete Address Of School System	From		To		Nature of Work (Grades, Subjects)	Reason for Leaving
	Mo.	Yr.	Mo.	Yr.		

TOTAL YEARS OF TEACHING EXPERIENCE _____
(EXCLUDE student teaching and/or assistant teaching experience.)

PERSONAL DATA

1. Date of Birth _____
2. Have you taken and passed the Praxis I and Praxis II Test? _____
3. Are you able to perform all the responsibilities, including extracurricular, that are normally a part of the position for which you are making application? _____ Yes _____ No

Explain: _____

4. Underline any of the following you are willing to sponsor or direct successfully:

Clubs, Production, Student Council, Student Newspaper, Yearbook,

Other _____

5. Underline any of the following which you are able and willing to coach or direct successfully:

Baseball, Basketball, Cheerleaders, Football, Golf, Tennis, Track, Playground Activities,

Other _____

6. Present Salary? _____ Expected Salary? _____

7. When could you begin work? _____

8. List Achievements and Honors: _____
- _____
- _____

9. Submit a copy of your Certificate. A transcript will be required prior to employment and three completed reference forms.

10. 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	Occupation

Within the space provided and in your own handwriting, please explain why you chose to be a teacher and why you would like to teach or work in the North Tippah Schools.

Check One

- I agree to a child abuse registry check. Yes _____ No _____
- I agree to a criminal records background check via finger print card. Yes _____ No _____
- I agree to pay a 32.00 fee for fingerprinting and the FBI national criminal history record check. Yes _____ No _____

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 _____

**** Applications will remain in the active file for one year from the date of the receipt and then will be classified as inactive unless notification is given to the North Tippah School District.



NORTH TIPPAH SCHOOL DISTRICT



P.O. Box 65, Tiptersville, MS 38674
Phone: 662-223-4384 Fax: 662-223-5379

Reference Form

Applicant: _____

Assigned To: Reference - _____ Phone Number: _____

_____ is an applicant for a professional teaching position. The information that you provide will help us make important staffing decisions.

Thank you for your time and input.

*****Please return completed form to North Tippah School District. (Mail or Fax)*

What position did the applicant occupy? _____

Between what dates did you work with the applicant? (Or between what dates have you known the applicant's work?) _____

In what capacity did you work with the applicant? _____

		Not Acceptable	Poor	Average	Good	Excellent
1. Professional Judgment	NA	1	2	3	4	5
2. Professional Attitude	NA	1	2	3	4	5
3. Cooperation	NA	1	2	3	4	5
4. Emotional Composure	NA	1	2	3	4	5
5. Time Management	NA	1	2	3	4	5
6. Knowledge in Field of Work	NA	1	2	3	4	5
7. Planning and Preparation	NA	1	2	3	4	5
8. Problem-Solving Skills	NA	1	2	3	4	5
9. Initiative/Personal Motivation	NA	1	2	3	4	5
10. Interpersonal Relations	NA	1	2	3	4	5
11. Teaching Ability	NA	1	2	3	4	5
12. Student Evaluation Skills	NA	1	2	3	4	5
13. Behavior Management Skills	NA	1	2	3	4	5
14. Acceptable Role Model	NA	1	2	3	4	5

On a scale of 1 to 10 (low to high), how would you compare the applicant to other employees you have supervised or worked with in similar positions? _____

How would you describe this candidate's teaching style? _____

Describe a time when the candidate faced a significant challenge in the classroom and how she/he worked to overcome the challenge. _____

If the applicant were to apply/reapply for employment in your district today, would you recommend hire/rehire? _____

Do you know of any reason why the applicant should not be employed to work with students? _____

Can you think of anyone else who would be important to contact before making an employment decision regarding this applicant? _____

Signature: _____

Date: _____



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