

WILKINSON COUNTY SCHOOL DISTRICT

P.O. BOX 785

WOODVILLE, MISSISSIPPI 39669

Telephone (601) 888-3582

Fax (601) 888-3133

(An Equal Opportunity Employer)

EMPLOYMENT APPLICATION

DATE:

Position(s) Desired (Check One or More):

[Empty box for date]

<input type="checkbox"/> Substitute Teacher	<input type="checkbox"/> Bus Mechanic	<input type="checkbox"/> Maintenance Supervisor
<input type="checkbox"/> Teacher Aide	<input type="checkbox"/> Bus Mechanic Helper	<input type="checkbox"/> Maintenance Worker
<input type="checkbox"/> Bookkeeper	<input type="checkbox"/> Cafeteria Supervisor	<input type="checkbox"/> Custodian
<input type="checkbox"/> Secretary	<input type="checkbox"/> Cafeteria Manager	<input type="checkbox"/> Other _____
<input type="checkbox"/> Clerk	<input type="checkbox"/> Cafeteria Worker	(Specify)
<input type="checkbox"/> Bus Driver	<input type="checkbox"/> Maid	

NAME _____
Last First Middle

ADDRESS _____
Street or P.O. Box Number City State Zip Code

TELEPHONE NUMBER: _____ Social Security Number _____

I possess above-average skills in the area(s) as follows:
(Please indicate by placing an "X" beside the skill)

<input type="checkbox"/> Reading	<input type="checkbox"/> Bookkeeping	<input type="checkbox"/> Operate Lawn Mower
<input type="checkbox"/> Math	<input type="checkbox"/> Shorthand	<input type="checkbox"/> Operate Tractor
<input type="checkbox"/> Computers	<input type="checkbox"/> Filing	<input type="checkbox"/> Operate Janitorial Equipment
<input type="checkbox"/> a. Operator	<input type="checkbox"/> Carpentry	<input type="checkbox"/> a. Buffer Machine
<input type="checkbox"/> b. Programmer	<input type="checkbox"/> Electricity	<input type="checkbox"/> b. Vacuum Machine
<input type="checkbox"/> Auto Body Repair	<input type="checkbox"/> Cooking	<input type="checkbox"/> c. Hedge Trimmer
<input type="checkbox"/> Auto Mechanic	<input type="checkbox"/> Plumbing	<input type="checkbox"/> Other _____
		(Specify)

List any office machines that you are able to operate: _____.

Do you take exceptional pride in your work? Yes No

Date available for employment: _____

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

EDUCATION

Name of School and Location Include High School, College, Graduate, and Post Graduate Work in the Order Taken	Dates Attended Month - Year	Degree Received	Major Subject	Semester Hours in Major	Minor Subject	Semester Hours in Minor

WORK EXPERIENCE

Name and Complete Address of Prior Employment	Period of Service Exact Month & Year	Number of Months	Nature of Work Duties, Responsibilities	Reason(s) for Leaving this Position

Total Months = _____

Total Years = _____

Are you presently employed? ___ Yes ___ No

If Yes, with whom? _____ Describe the type of work: _____

Have you previously been employed by the Wilkinson County School District? ___ Yes ___ No

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

Do you have a current Mississippi Teaching Certificate? ___ Yes ___ No

Do you have a current Mississippi School Bus Driver's Certificate? ___ Yes ___ No

Have you ever been asked to resign, been discharged, or failed to be re-employed? ___ Yes ___ No

If Yes, please give details: _____

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

If Yes, please explain: _____

Are you honest? ___ Yes ___ No

List any and all physical and/or mental limitations: _____

Use the following space for any additional information you wish to submit: _____

CHARACTER DETERMINATION

1. Do you have an emotional or mental disability that renders you unfit to perform the duties authorized by the position(s) for which you are applying? ___ Yes ___ No
2. Are you actively addicted to or actively dependent on alcohol? ___ Yes ___ No
3. Are you actively addicted to or actively dependent on any habit-forming drugs? ___ Yes ___ No
4. Are you a habitual user of narcotics, barbiturates, amphetamines, hallucinogens, or other drugs having similar effect? ___ Yes ___ No
5. Have you been convicted of, pled guilty or entered a plea of nolo contendere to a felony, as defined by federal or state law? * ___ Yes ___ No
6. Have you been convicted of, pled guilty or entered a plea of nolo contendere to a sex offense, as defined by federal or state law? * ___ Yes ___ No
7. Do you presently have any contagious diseases? ___ Yes ___ No

*If you answered "Yes" to any of these questions above:

(a) Submit official copies of the court record including the disposition of case;

(b) Provide on a separate sheet the specifics of or an explanation for the response.
Explain fully your reasons for wanting to work in this school district.

REFERENCES

List the name, position, and address of six (6) individuals as your references.
Include supervisors under whom you have worked in addition to college professors and teachers.
Please do not list relatives as references.

Name	Official Position	Address	Telephone 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. If employed, I agree to abide by all the policies approved by the Board of Education and will cooperate fully with all district inservice programs. I understand that this application will remain in the active file for a period of one (1) year and then will be classified as inactive unless I notify the personnel office in writing to keep the application current.

Date _____

Signature _____