Amite County School District

P.O. Box 378,533 Maggie Street Liberty, MS 39645

Dear Applicant:

We are delighted that you have requested an application for a position in the Amite County School District. We welcome your application and look forward to reviewing it.

Enclosed with the application are other required documents that must be completed and returned before you are eligible for employment. A completed application includes:

- Completed Application Form
- Photocopy of Social Security Card
- Photocopy of Mississippi Educator License (If applicable)
- Photocopy of NTE, Praxis and/or CMEE Test Scores (If applicable) Photocopy of Driver's License
- Background Check Authorization
- Citizenship I-9 Form
- Child Abuse Registry Check
- Transcripts

Please complete the application packet and return it as soon as possible. Insufficient addresses stop the process, so please verify the correct mailing address of your references and former employers.

Since we are continually seeking exceptionally qualified professionals, we sincerely value your interest in our school system and welcome any inquiries. If we can be of further assistance, you may send email to swhittington@amite.k12.ms.us or call us at (601) 657-4361.

Sincerely,

Scotty H. Whittington Superintendent

APPLICATION FOR EMPLOYMENT

AMITE COUNTY SCHOOL DISTRICT

533 MAGGIE STREET, LIBERTY, MS 39645 601-657-4361

Scotty H. Whittington, Superintendent of Education

ALL NEW PERSPECTIVE EMPLOYEES MUST BE FINGERPRINTED. ALL EMPLOYEES MAY BE SUBJECT TO A DRUG TEST. THESE PROCEDURES MUST BE DONE BY OUR DISTRICT PERSONNEL.

PERSONAL INFO	RMATION:				
NAME					
ADDRESSSTREE	T/P.O. BOX		CITY	STATE	ZIP CODE
Telephone_(HM)	(CELL)		OCIAL SECURI	TY NO	AGE
COLOR OF HAIR:	COLOR OF EY	ES: RA	CE:	GENDER: MALE	FEMALE
NUMBER OF DEF	PENDENTS: U.	S. CITIZEN: YES	NO	DATE OF BIRTH:_	
IF RELATED TO A	ANYONE IN OUR EMPLOYME	NT, STATE NAME & D	EPARTMENT		
Race and gender in EMPLOYMENT DI	information is used for state a	and federal report requ	irements only a	nd is not manditory.	
POSITION:	DA?	TE YOU WILL BE AVA	ILABLE:	SALARY D	ESIRED:
CERTIFIED APPL	ICANTS: CLASS A AA	AAA AAA	A ENDOR	SEMENTS:	
CERTIFICATE VA	LID UNTIL	MS LICENSE N	UMBER		YRS. EXP
ARE YOU PRESE	NTLY EMPLOYED?	_ IF SO, MAY WE INC	UIRE OF YOUR	PRESENT EMPLOYE	R?
ARE YOU RETIRE	D FROM ANOTHER STATE?	YES NO	IF SO, WHA?	Γ STATE?	
EDUCATION	NAME & LOCATION OF SCHOOL	YEARS ATTENDED	DAT GRADU		DEGREE OBTAINED
SCHOOL					
SCHOOL					
CGE					
E, BUSINESS,					

SUBJECTS OF SPECIAL STUDY OR RESEARCH WORK

NO PERSON WILL BE DENIED EMPLOYMENT ON THE BASIS OF SEX, RELIGION, BELIEF, OR NATIONAL ORIGIN OF ETHNIC GROUP

Employment History

FORMER_EMPLOYERS (List below the last four employers, beginning with the most recent

Date, Month & Year	Name and Address of Employer	Salary	Position	Reason for Leaving
From				
То				
From				
То				
From				
То				
From				
То				

References

Must include at least four references who are not related to you, at least one must be a former employer

Name	Complete Mailing Address	Telephone Number	Relationship	Years Acquainted

General Questions

1.	Have you ever applied in this district? Yes _ No Where When
2.	Have you previously been employed by the Amite County School District? Yes No
3.	Are you presently enrolled in the State Employees Health Program? Yes No
4.	Give the approximate number of days you missed, for illness or otherwise, for a one year period in your last full-time employment
5.	Are you able to perform the essential functions of this job without accommodations? Yes No _
	If no, what accommodations will be required:
6.	Are you a veteran? Yes No
	If yes, list branch of service, period of active duty, and rank
7.	List any special talents you have that may be beneficial to you in the position for which you have applied
8.	List professional organizations of which you are a member
9.	Briefly describe why you wish to secure a position in the Amite County School District
10.	Have you ever been arrested, convicted of or plead guilty or nolo contendere to any crime, other than a minor traffic violation? Yes No If yes, state the name and address of the Court, the date of the alleged offense, a description of the charges, and an explanation of the final action taken, including any fines, probation, imprisonment, or
11.	Have you ever been arrested or charged with any crime or been named in an indictment, accusation or
	special presentation for any offense, other than a minor traffic violation? YesNo
	If yes, explain:
12.	Are you presently the subject of any pending criminal charges? Yes No
	If yes, explain and attach full details
13.	Have you ever been asked to resign, been discharged, non-renewed or terminated from any previous
	employment? Yes _ No _ If yes, explain
14.	Are you currently addicted or dependent on alcohol? Yes No
15	Are you currently addicted or dependent on other habit-forming drugs? Yes No

16. Are you a habitual user of narcotics, barbiturates, amphetamines, hallucinogens, or other drugs having
similar effects? Yes No
17. Do you have a valid CDL License? Yes No
18. I agree to be drug/alcohol tested if I am involved in any type of accident involving this school
district? Yes No
Certified Employees
Only Certified Employees Need to Complete this Section.
1. Are you presently under contract to any school system: Yes No
If yes, list name of school district Contract Ending Date
2. Do you have current recommendations on file in a college teacher placement office? YesNo
If yes, name and address of college or university
3. List co-curricular activities that you are qualified and prepared to coach or direct
4. List college and/or community activities and honors engaged in or received before and <i>since</i> graduation.
5. Have you ever had a professional certificate/license revoked? Yes No
If yes, explain:
6. Are you currently pursuing a higher degree or an additional area of certification? YesNo
If yes, explain:
All Applicants Must Complete this Section
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. I authorize investigation of all statements contained herein as may be necessary in arriving at an employment decision. I understand that any false or misleading information given in this application or interview(s) may result in my not being considered for the position(s) for which I have applied or if employed may result in my termination. I understand that the application will remain in the personnel files of the Amite County School District for twelve (t2) months from the date of application, and will then be destroyed.
Applicants
Signature: Date:

Return Application To: Amite County School District, $533~\mathrm{S.}$ Maggie Street, P.O. Box 378, Liberty, $\mathrm{MS}~39645$