



**Thomas D. Parker**  
Superintendent of Education  
5204 HWY 11 North  
Ellisville, MS 39437  
Telephone (601) 649-5201  
Fax (601) 649-1613

TO: Prospective Personnel  
FROM: Superintendent of Education

An official transcript of all college credit is a part of your personnel record and must be furnished as soon as possible. Please do not delay in returning your application. If a college transcript cannot be furnished at this time, we request that it be sent as soon as possible. Transcripts must indicate that you have earned at least a bachelor's degree from an accredited institution of higher learning.

All applicants must secure a valid Mississippi Teaching Certificate at the elementary or secondary level with the proper teaching area endorsement. This may be obtained by writing the Office of Teacher Certification, State Department of Education, Post Office Box 771, Jackson, MS 39205, or by calling area code (601) 359-3483.

A copy of your Mississippi teaching certificate(s) should accompany your application. Please have it sent as soon as possible. (Send only a copy, NOT the original.)

No application shall be considered or processed until all the required information has been received in the office of the Jones County Superintendent of Education.

A recent photo of yourself is optional.

If you become employed in another school system, please notify the Jones County School System in writing.

All applications will be classified as inactive after remaining in the current files for a period of one (1) year.

CERTIFIED PERSONNEL  
 Jones County School District  
 5204 Highway 11 North  
 Ellisville, MS 39437

FOR OFFICE USE ONLY

Date Processed \_\_\_\_\_  
 Date Reactivated \_\_\_\_\_  
 Transcripts Yes \_\_\_\_\_ No \_\_\_\_\_  
 References 1 2 3 4  
 Interview By \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Name \_\_\_\_\_  
 Last First Middle/Maiden

Social Security # \_\_\_\_\_ Date of Birth \_\_\_\_\_

Present Address \_\_\_\_\_  
 Street City State Zip

Area Code Telephone \_\_\_\_\_ Community Residing In \_\_\_\_\_

Applying for Position of \_\_\_\_\_

I. Education

SCHOOLS	NAME & ADDRESS OF INSTITUTION	DATES	DEGREE	GPA	AREA OF SPECIALIZATION
High School					
College					
Graduate					
Post Graduate					

II. Certification

MS Certificate # \_\_\_\_\_ Class \_\_\_\_\_ Type \_\_\_\_\_ Expiration \_\_\_\_\_

Areas of Current Endorsement (A) \_\_\_\_\_ (B) \_\_\_\_\_

Undergraduate Semester Hours in (A) \_\_\_\_\_ (B) \_\_\_\_\_

Graduate Semester Hours in (A) \_\_\_\_\_ (B) \_\_\_\_\_

Praxis I \_\_\_\_\_ Praxis II \_\_\_\_\_

Common or Core Battery Scores (C) \_\_\_\_\_ (G) \_\_\_\_\_ (P) \_\_\_\_\_

Jones County School District is an Equal Opportunity Employer and does not discriminate on the basis of gender, race, religion, color, national origin, age, or handicap.

III. References

List 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

IV. Experience

Past employment record (Start with present position. Include student teaching if completed within the last 5 years.)

SCHOOL OR FIRM & COMPLETE ADDRESS	DATE	NUMBER OF MONTHS	POSITION, GRADE & SUBJECT	REASON FOR LEAVING

V. Personal Data

Secondary Applicants – What co-curricular activities can you direct successfully? \_\_\_\_\_

\_\_\_\_\_

List professional activities and honors before and since graduation. \_\_\_\_\_

\_\_\_\_\_

What position of leadership or responsibility have you held in school, work? \_\_\_\_\_

\_\_\_\_\_

What professional organizations are you affiliated with? \_\_\_\_\_

\_\_\_\_\_

What periodicals do you read? \_\_\_\_\_

\_\_\_\_\_

Are you presently under contract with any school system? \_\_\_\_\_

What school system? \_\_\_\_\_ Until \_\_\_\_\_

When is the earliest you could begin work here? \_\_\_\_\_

Please give names and addresses of any relatives who work for this school district or who are members of the school board. \_\_\_\_\_  
\_\_\_\_\_

Have you ever been asked to resign, been discharged, or fail to be re-employed 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. \_\_\_\_\_  
\_\_\_\_\_

Note: Please attach a brief summary of your philosophy of education in your own handwriting. \_\_\_\_\_  
\_\_\_\_\_

**READ CAREFULLY**

The information contained herein is true and represents me accurately. 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. I agree that any omissions or false statements will constitute reasons for dismissal.

About your application: This application will be transferred to the inactive file twelve (12) months from the date of application. This application will be re-activated for an additional twelve (12) month period upon request. After remaining in the inactive file for two (2) consecutive years, this application will be destroyed. If employed, this application will become a part of your permanent file.

Return application to: Personnel Department  
Jones County School District  
5204 Highway 11 North  
Ellisville, MS 39437

\_\_\_\_\_  
DATE

\_\_\_\_\_  
SIGNATURE

**JONES COUNTY SCHOOLS**  
**APPLICANT BACKGROUND CHECK**

*Consent for Misdemeanor and felony criminal background check*

NAME: \_\_\_\_\_  
First Middle Last Maiden

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

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

PHONE NUMBER: \_\_\_\_\_

I, \_\_\_\_\_  
hereby give my consent to the Jones County School District and to any law enforcement agency to discuss any misdemeanor and/or criminal records that I have. This is to include all records with or without dispositions.

I understand that the results of this investigation could cause the Jones County School District not to consider me as an employee.

Furthermore, I understand that my refusal to allow the background check will remove my name from employment consideration.

DATE: \_\_\_\_\_ SIGNATURE: \_\_\_\_\_  
(Applicant)

DATE: \_\_\_\_\_ SIGNATURE: \_\_\_\_\_  
(Witness)