Application for Employment Please Print

Greene County School District P O Box 1329 528 Oak Street Leakesville MS 39451 601-394-2364 Phone 601-394-5542 Fax

Equal access to programs, services and employment is available to all persons. Those applicants requiring reasonable accommodations to the application and/or interview process should notify a representative of the Human Resources Department.

Position(s) applied for				ation/	YesNo \$
Teacher Applicants	s: Please attach a cop	oy of Mississippi Teach	er License		
Name		Social Securi	ty #	Date of Birt	:h
Last F		ddle			
Address Street Telephone # () Mo	City bbile/Beeper/Other # (E-mail Addr	Zip Code ress	
Referral Source (How did you hear about t	us?)				
Have you ever been employed here before	? If yes, give dates an	d positions			
Are you legally eligible for employment in	this country?			Y	esNo
Date available for work/	/ What is yo	our desired salary range	?	\$	
Type of employment desiredl	Full-TimePart-	ГimeTemporary	Seasonal	Educational C	Со-Ор
Driver's license number if driving may be Answering "yes" to the following question does not a Violation, rehabilitation and position applied for will Have you ever pled "guilty" or "no contest If yes, please provide date(s) and details	onstitute an automatic bar to be taken into account. " to, or been convicte	to employment. Factors such a d of a crime?	as date of the offense	, seriousness and nature $Y\epsilon$	e of the
Employment History Starting with your most recent employer, p	rovide the following	information.		Month Year	Month Year
Employer	()Phone			/to Dates Employed	
Street Address	City	State	Hourly	Salary \$	
Starting job title/final job title			Commission/Box		
Immediate supervisor and title (for most recent position	on held)				
Why did you leave?					
Summarize the type work performed and job responsi	bilities.				
What did you like most about your position?					
What did you like least about the position?					
				Month Year	Month Year
Employer	Phone ()_			/to Dates Employed	
Street Address	City	State	Hourly	Salary	per
Starting job title/final job title			Commission/Box	nus/Other	
Immediate supervisor and title (for most recent position	on held)				
Why did you leave?					
Summarize the type work performed and job responsi	bilities.				
What did you like most about your position?					
What did you like least about the position?					

	()		Month	h Year Month Year
Employer	Phone		Date	s Employed
Street Address	City	State	Hourly Salary	\$per
Starting job title/final job title			Commission/Bonus/Other	\$
Immediate supervisor and title (for most	recent position held)			
Why did you leave?				
Summarize the type work performed and	job responsibilities.			
What did you like most about your position	ion?			
What did you like least about the positio	n?			
Skills and Qualifications Summarize any special training, skills (c	omputer), licenses and/or certificates that ma	ny assist you in performin	g the position for which you are	applying.
Educational Background				
School	Years Completed	GPA	Major/Minor	
School	Years Completed	GPA	Major/Minor	
School	Years Completed	GPA	Major/Minor	
References				
Name	Title	Relationship	Telephone	#years known
Name	Title	Relationship	Тетернопе	#years known
Name	Title	Relationship	Telephone	#years known
Name	Title	Relationship	Telephone	#years known
I expressly authorize, without reservation	ded in order to apply for and secure work wit	es or agents to contact and	l obtain information from all ref	
application, resume or job interview. I h	s, licensing authorities and educational instituereby waive any and all rights and claims I namatory information, in a lawful manner, in t	nay have regarding the en	nployer, its agents, employees or	r representative, for seekir
	unlawfully discriminate in employment and i ment on any basis prohibited by applicable lo		ation is used for the purpose of	imiting or eliminating any
I understand that this application remains employment, it will be necessary for me	s current for only 30 days. At the conclusion to reapply and fill out a new application.	of that time, if I have not	heard from the employer and s	ill wish to be considered f
terminate my employment at any time, wagreement or contract for employment for	to resign at any time, with or without cause a with or without cause and with or without prior or any specified period or definite duration. I that no implied oral or written agreements co	or notice, except as may b understand that no super	e required by law. This applications or representative of the en	tion does not constitute an apployer is authorized to
I also understand that if I am hired, I wil require me to complete an I-9 Form in the	be required to provide proof of identity and is regard.	legal authorization to wo	rk in the United States and that	ederal immigration laws
	ed by me that is found to be false, incomplete (ii) may result in my immediate discharge fr			e to (i) eliminate me from
	READ THE ABOVE APPLICANT STATE d and accept all terms of the foregoing Applie			
Signature of Applicant			Date/	/