## Baldwyn Schools District 107 West Main Baldwyn, Mississippi 38824

## Licensed Employment Application

	Date of Application//		
Name of Appl	licant/	(Middle Name)	(Last Name)
Address			<del></del>
	StateZip_		
Daytime Phon	e Number ()	Social Security Number _	
Email Address	s:		
Position Desir	red:     Teacher   Administrati		
	Endor	sement Information	
Do you have a	MS License? ☐ Yes ☐ No If yes, lis	st License # Ex	piration Date//
CLASS	Endorsements ( List by Number)	Check Grade Level Desired	Subject Preferred (if 6-12)
□ AAAA □ AAA □ AA		4_3_6_/_8_9	1 <sup>st</sup> Choice 2 <sup>nd</sup> Choice
Are you Natio	nal Board Certified?   Yes   No		
Are you curren When could you Are you related	opriate box if applicable:	f yes, wherechools District?   Yes  No	
(Rel	ationship)	(Name o	f School)

	Educational Information (Additional information may be attached if necessary)						
	List Calcad and Lauretine (List demonstration)		Dates	Dates Attended			Malan
	List School and Location	(List chronologically)	From	То	Type of De	egree	Major
-							
		(4					
			-				
	***************************************						
						1	
					Marianian Company		
		Experience (If no	teaching ex	perience, list	student teachin	ıg)	
	Name of School:					Telephone	:#
						()	
	Address:					Date of Employment	
1						From:	To:
	Name of Supervisor:					Reason for	r Leaving:
					are no en zon magn		
	Describe Briefly Position						
	N						
	Name of School:					Telephone	:#
	Address:					Date of Employment	
	12001000					From:	To:
2							
	Name of Supervisor:					Reason for	r Leaving:
	Position						
	FOSITION						
	Name of School:	9	the state of the s			Telephone	:#
	Address:						nployment
3						From:	To:
	Name of Supervisor:					Reason for	r Leaving:
	^						244,146
	Position						
_	Name of School:					m.1.1	
	Name of School;					Telephone	#
1	Address:					Date of Er	nployment
4						From:	To:
	Nama of Communication					D C	T .
	Name of Supervisor:					Reason for	Leaving:
1	Position					1	

Total years of teaching experience:

171-		References (Minim	num of (4) Required)		4412
	lude superintendent, principals, or s fessional preparation (including stu				your
	Name & Title of Reference	School/Organization	Address	Phone Number	Years Knowr
1					
2					
3					
4					
		Activities (List any activities the	hat you are capable of coac	hing, directing or sponso	ring)
				**	
Have	you ever failed to be re-employe	ed?	re?		
State	reason:				
Have	you ever been convicted of a felo	ony, a misdemeanor or any offe	nse involving moral tur	nitude?     Vec     N	
If yes	s, attach full details		moo my ory mg mor mr tur	prince. 1 103 11 1	
In yo	our own handwriting, please prov	vide a brief biographical sketch	. Include in this biogra	phy your reason for	entering
the to	eaching profession.				
				···	

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Why do you wish to be employed by the Baldwyn School Distric	t?	
I understand that Baldwyn School District reserves the right t false statement(s) or failure to disclose information may be suffi	cient to disqualify me from empl	oyment.
Applicant's Signature	Date	
It is the responsibility of <u>beginning teachers</u> to provide the school distributed Mississippi License (if available) for application to be complete. <u>Exper</u> Mississippi License (if available) or a copy of your <u>out-of-state licensed</u> NEEDED UPON EMPLOYMENT: COPY OF DRIVER'S LICENSE	ienced teachers are to provide a co	py of his/her transcripts and TIONAL INFORMATION
APPLICATION WILL REMAIN ACTIVE FOR ONE YEAR FROM principle of equal educational and employment opportunity without regaincludes the qualified handicapped and pertains to all programs and activities.	rd to race, sex, age, color, creed or	national origin. This policy
FOR OFFICE USE ONLY:		
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