

Bay St. Louis - Waveland School District

201 Carroll Avenue
 Bay St. Louis, MS 39520
 Phone: (228) 467-6621

APPLICATION FOR CERTIFICATED EMPLOYMENT

[Application will remain active for two years from date of application.]
 [Please print or type.]

Section I -- PERSONAL DATA

- Miss
- Mrs.
- Ms.
- Mr.
- Dr.

	LAST NAME	FIRST	MIDDLE		(MAIDEN)
PRESENT ADDRESS	CITY	STATE	ZIP CODE	(AREA CODE)	PHONE
PERMANENT ADDRESS	CITY	STATE	ZIP CODE	(AREA CODE)	PHONE

SOCIAL SECURITY NUMBER: - - -

Section II -- LICENSE/CERTIFICATE

Mississippi Educator's License	License Number	Level(s) of License	Endorsement Code(s)	Area(s) of Endorsement
		<input type="checkbox"/> A <input type="checkbox"/> AAA <input type="checkbox"/> AA <input type="checkbox"/> AAAA		

- I hold an out-of-state license. Specify: _____
- I hold an alternate route/emergency license. Specify: _____
- I will complete the requirements for a license on _____

Position Desired:	Teacher _____ Coach _____ Administrator _____ Counselor _____ Other _____
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Elementary Grade Level Preference(s):

_____	_____	_____
First Choice	Second Choice	Third Choice

Secondary Subject Preference(s):

_____	_____	_____
First Choice	Second Choice	Third Choice

- Coach Sport(s): _____
- Sponsor Club(s): _____

Test Scores:	NTE/ Praxis II	Alternate Route
	Principles: _____ CS: _____ GK: _____ PK: _____ Area: _____	Praxis I: _____ CMEE: _____

Section III -- EDUCATIONAL AND PROFESSIONAL TRAINING

College/University [List in order of attendance]	Location [City, State]	Dates Attended [Year - Year]	Degree	Major	Minor

For First Year Teachers Only Student Teaching Experience

School and District	Grade/Subject	Supervising Teacher	Principal	College Supervisor
First Experience				
Second Experience				

Section IV -- EMPLOYMENT HISTORY

FULL TIME TEACHING and/or ADMINISTRATIVE EXPERIENCE

List experience in chronological order, most recent date first. Substitute teaching and paraprofessional experience should be listed under **Other Work Experience**.

School/School District	Mailing Address	Assignment (e.g., grade level, subject)	Dates Year-Year	Years of Experience
Total Full Time Years of Experience				

[Include additional list if necessary.]

OTHER WORK EXPERIENCE

Employer	Mailing Address	Assignment	Dates Year - Year	Years of Experience

Section V -- REFERENCES

REQUIRED FOR EMPLOYMENT CONSIDERATION

1. Application for employment.
2. *Reference Evaluation Forms (3)* or College Placement File.
3. Copy of Teaching License.
4. Resumé.
5. Transcript (may be an unofficial copy.)

List references (below) and provide three with a *Reference Evaluation Form*.

Name and Title: School/Location: Mailing Address: Telephone:	
Name and Title: School/Location: Mailing Address: Telephone:	
Name and Title: School/Location: Mailing Address: Telephone:	
Name and Title: School/Location: Mailing Address: Telephone:	

Section VI -- PROFESSIONAL DATA

Yes No

1. Are you a citizen of the United States of America?
2. Have you been employed previously by the Bay St. Louis - Waveland School District?
3. Have you ever been convicted of a felony?
4. Have you ever been dismissed/non-renewed from employment by a school district?
5. Have you ever been given the opportunity to resign or resigned under duress or told you were going to be dismissed if you didn't resign?
6. Have you ever had a professional certificate/license revoked?
7. Are you currently under contract with a school district?

COMMENTS/ELABORATION ON ANY OF THE ABOVE: _____

Section VII -- SIGNATURE SECTION

Read the following statements carefully before signing.

- I certify that the information entered on this application is true and correct. I am aware that any deliberate falsification of material fact may be grounds for termination of services.
- If employed, I agree to abide by all the policies of the Board of Trustees and cooperate fully with inservice programs for professional improvement.
- I voluntarily give the Bay St. Louis-Waveland School District the right to investigate my past employment and background and all statements contained in this application.
- If offered employment, I understand I must submit to an FBI background check and child abuse registry check. Contractual employment is contingent upon clearance of background checks.

Signature _____ Date _____

The Bay St. Louis-Waveland School District does not discriminate on the basis of gender, race, religion, color, national origin, age, or disability.

Application for Mississippi Licensure may be secured from:

Office of Educator Licensure
Mississippi Department of Education
P. O. Box 771
Jackson, MS 39205-0771.
Telephone: (601) 359-3483
[HTTP://MDEK12.STATE.MS.US/OVTE/LICENSE/LICENSE.HTM](http://MDEK12.STATE.MS.US/OVTE/LICENSE/LICENSE.HTM)