

verified after November 1 will not be credited, for salary purposes, until the following year.

SCHOOL, SCHOOL DISTRICT, CITY, STATE	GRADE	SUBJECTS	PERIOD OF SERVICE	
			FROM MONTH-YEAR	TO MONTH-YEAR

References (Minimum of three required) – One reference must come from your most recent **school principal or supervisor of student teaching**. Also include superintendents, principals, or supervisors with whom you are working or for whom you have worked.

POSITION	NAME AND ADDRESS
Most recent school principal or supervisor	

Have you ever been dismissed or failed to be rehired? _____ If yes, please explain.

Have you ever been charged or convicted of a misdemeanor, a felony, or any offense involving moral turpitude? Yes No
If yes, fully explain the circumstances below.

Supplementary or Explanatory
Comments _____

By signing below, I hereby certify that all statements made hereon are true and correct to the best of my knowledge, and I authorize the investigation of all statements hereon recorded. I release from all liability persons and organizations reporting information required by this application. I understand that any omission or false statement made by me will be sufficient grounds for failure to employ or for discharge.

Signature

In employment, job assignment, and employee/employer relations, no procedure shall discriminate against any applicant or employee on the basis of age, sex, race, or national origin.

**Greenville Public School District
Greenville, Mississippi 38701
REFERENCE EVALUATION FORM**

**PART I
(To Be Completed by Applicant)**

Three references are required. One must come from your most recent school principal or supervisor of student teaching.

Applicant Name _____ Social Security No. _____

Home Telephone _____ Work Telephone _____ Position Desired _____

Please complete the evaluation found in Part II below based on your knowledge of my background and return this self-addressed mailer.

I hereby waive my right to access of this confidential recommendation obtained for my application for employment.

Signature _____

Date _____

**PART II
(To Be Completed by Evaluator)**

COMMAND OF ENGLISH LANGUAGE	Extremely fluent/precise	Correct in usage	Usually correct	Frequently incorrect
KNOWLEDGE OF SUBJECT MATTER	Superior in subject matter	Adequate in subject matter	Limited in subject matter	Insufficient in subject matter
SKILL IN INSTRUCTION	Outstanding/Innovative	Experienced	Unexceptional	Needs supervision
ENTHUSIASM FOR TEACHING	Extremely enthusiastic	Enthusiastic	Usually involved	Not a self starter
CLASSROOM CONTROL	Implements student self discipline	Consistent in discipline	Inconsistent	Little control
PROFESSIONAL ATTITUDE	Always professional	Professional	Usually professional	Frequently unprofessional
USE OF SOUND JUDGEMENT	Exceptional in Judgment	Good in common sense	Fair in judgment	Unreliable in judgment
RELIABILITY	Always dependable	Usually dependable	Fairly reliable	Inconsistently reliable
CHARACTER	Outstanding	Above average	Average	Fair
RELATIONSHIP WITH OTHERS	Superior	Above average	Satisfactory	Frequently annoying
COOPERATION	Outstanding	Cooperative	Usually cooperative	Uncooperative

Please comment on the following:

1. Would you recommend applicant for position applied for? Yes No

If no, please explain.

2. Would you reemploy? Yes No

If no, please explain.

3. General comments _____

Signature _____

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If no, please explain.

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Signature _____

**GREENVILLE PUBLIC SCHOOLS
412 South Main Street
Greenville, Mississippi 38701**

This document is part of the Greenville Public School District application for employment.

Applicant Name (Please Print) _____

Social Security Number _____ Date of Birth _____

In connection with your application for employment, please answer the following questions:

Have you ever pled guilty to an offense other than a minor traffic violation?

Yes No

Have you ever pled "no contest" to an offense other than a minor traffic violation?

Yes No

Have you ever been convicted of an offense other than a minor traffic violation?

Yes No

If you answered "**Yes**" to any of the above questions, please list the particular circumstances below.

DATE	LOCATION	CHARGE	COURT	DISPOSITION OF CASE

I understand that the Greenville Public School District reserves the right to verify all information in this application and that any false statements or any failure to disclose information may be sufficient grounds to disqualify me from employment or, if employed, may result in dismissal.

Applicant
Signature _____ Date _____

CHILD ABUSE REGISTRY CHECK

To: Mississippi Department of Human Services
Child Abuse Central Registry
Division of Family and Children's Services
P.O. Box 352
Jackson, MS 39205

From: _____

Name: _____

Title: _____

School District: _____

Address: _____

City/Zip: _____

In accordance with Senate Bill 2658 a Child Abuse Central Registry Check is requested for the following school personnel or employee:

Name: _____
(Please print name(s) include aliases, nickname, and maiden names(s))

Social Security Number: _____ Date of Birth: _____

Address: _____

I understand that this information must be kept confidential with my agency.

Signature: _____
(This section to be completed by MDHS Offices of Social Services Staff)

Findings:
_____ No identifying information was found in the central registry
_____ The following information was found in the central registry.

Signature _____

_____ Date

**CRIMINAL BACKGROUND
QUESTIONNAIRE**
(Supplement Employment Application)

With respect to a city or Community in which you have resided for the past ten (10) years, state the following below:

A) The name of the City/Community; and B) The period of time you resided in each.

	<u>City/Community</u>	<u>Date</u>
1.	_____	_____
2.	_____	_____
3.	_____	_____
4.	_____	_____
5.	_____	_____

Have you ever been charged or convicted of either of the following crimes: Yes____ No____
 (a) Felony of Possession or Sale of Drugs; (b) Murder; (c) Manslaughter; (d) Armed Robbery; (e) Rape; (f) Sexual Battery; (g) Sex Offense; (h) Child Abuse; (l) Arson; (j) Grand Larceny; (k) Burglary; and (l) Gratification of Lust; (j) or Aggravated Assault.

If your answer is yes, provide the following information with regard to each charge or conviction.

<u>The Crime (Identify)</u>	<u>Date Charged</u>	<u>Disposition</u>
a. _____	_____	_____
b. _____	_____	_____
c. _____	_____	_____
d. _____	_____	_____

Are you presently on probation or on parole of a criminal conviction? Yes____ No ____

Do you presently have any criminal charge pending against you at this time? Yes____ No ____

I understand that the information requested above will be used for purpose of evaluating my suitability for employment by the Greenville Public School district only and will not be disclosed to any third party or agency. Further, I hereby certify under penalty or perjury that my answers to the foregoing questions are true and complete.

Signature: _____

Date: _____

PERMISSION FOR RELEASE OF INFORMATION
FROM CRIMINAL RECORDS

I hereby give my permission for the release to, Mr. Estes Taplin Superintendent of Greenville Public School District, of information from law enforcement file concerning any past history of sex offenses or offenses against children, with which I may have been charged or convicted.

I understand that the information to be released will concern only charges and/or convictions of carnal knowledge of a child under 14 years of age, sexual battery, seduction of a child under the age 18, touching a child for lustful purposes, disseminating sexually oriented material to children, exploitation of children, carnal knowledge of a stepchild, adopted child or a child of a cohabiting partner, or unnatural intercourse. No information will be released on any criminal record I may have which does not relate to these particular crimes.

I understand that information will be released on my conviction, any pending charges, or any arrests if I have been arrested two or more times.

I understand that Mr. Estes Taplin has the right to require this record checked as a condition of employment.

I understand that I will be sent a copy of any information released from my files pursuant to this permission form and that I have the right to challenge the accuracy and completeness of this information.

I understand that this information will be used only for employment purposes and will not be re-disseminated to other persons or used for any other purpose.

Name—Please Print

Street-Address or Box Number

City, State, Zip Code

Social Security Number

Witness to Signature

Date of Birth

Date

Name--Signature

GENERAL AUTHORIZATION FOR RELEASE OF INFORMATION
FROM CRIMINAL RECORDS

I hereby give my permission to Mr. Estes Taplin, the Superintendent of Greenville Public District, or his designee, to obtain from any law enforcement agency, state, or federal all information from law enforcement files concerning any past history of criminal felony offenses with which I may have been charged or convicted.

I understand that the information to be released shall relate to any and all felony arrests, charges and convictions of any nature, classification or degree, but shall not include misdemeanors and/or traffic offenses.

I understand that the Superintendent of the Greenville Public School District has the right and obligation to require this record check as a condition of employment by the Greenville Public School District.

I understand that I will be provided with a copy of any report released from your files pursuant to this permission form, and that I have the right to challenge the accuracy and completeness of the information reported.

I understand that this information will be used only for employment purposes and will not be re-disseminated to other persons or used for any other purpose.

	Name—Please Print
	Street-Address or P.O. Box Number
	City, State, and Zip Code
	Social Security Number
Witness to Signature	Date of Birth
Date	Signature of Applicant

PERMISSION FOR RELEASE OF INFORMATION
FROM CRIMINAL RECORDS

TO: ALL LAW ENFORCEMENT AGENCIES

I hereby give my permission for the release to Mr. Estes Taplin, Superintendent of Greenville Public School District, or his designee, any and all information from law enforcement files regarding any felony crimes with which I have been charged or convicted, without limitation, and the following types of misdemeanor crimes:

- 1) Crimes involving the possession, sale and abuse of alcohol and drugs, including public drunkenness,
- 2) Sex offenses, including but not limited to sexual battery, fondling of a child and any other sex offenses against children; and
- 3) Crimes of violence.

I understand that the information to be released, if any includes all convictions, all pending charge and all arrests for pertinent offenses.

I understand that the Greenville Public School District has the right to require this criminal background check as a condition of employment.

I understand that I will be sent a copy of any information released from your files pursuant to this authorization, and that I have the right to challenge the accuracy and completeness of the information provided.

I understand that this information will be used only for employment purposes and will not be re-disseminated to other persons or used for any other purpose.

This the _____ day of _____, 20_____.

Signature of Applicant

**Greenville Public Schools
Human Resources Department**

Theft of Property Form

Please print:

Employee Name _____

The theft, misappropriation, or any other unauthorized removal of property belonging to the Greenville Public School District is strictly prohibited and will not be tolerated.

Any Greenville Public School District employee who removes, steals, misappropriates, or participate in the removal, theft, or misappropriation of any property belonging to the Greenville Public School District, will be subject to immediate termination and full restitution will be required.

I have read and understand the contents of this notice.

Employee Signature _____

Date _____