



On the Winds of Success

Gulfport School District

P.O. Box 220
Gulfport, MS 39502-0220
228-865-4600

Professional Employment Application

Name: _____
(As shown on Social Security Card)

Present Address: _____
Street
City State Zip Code Until: _____

Phone () _____ Cell: () _____
(area code) (area code)

Permanent Address: _____
Street
City State Zip Code Until: _____

Phone () _____ Cell: () _____
(Area code) (Area code)

Social Security Number: _____ E-mail Address: _____

Position Applying For

(1) _____
(Indicate grades, or if secondary, subjects in order of preference)

(2) _____

(3) _____

(4) _____

Date _____

Note: *The applicant should exercise the greatest care in preparing this form. Information given herein becomes a legal part of the contract in case of election. Please do not omit any item.*

Education

Note: A semester hour is one class per week for not less than 18 weeks.

Name of school and location, include high school, college, graduate work and summer sessions in order taken)	Date	Time Spent	Semester Hours Credit	Degree or Diploma	Minor Subject and Semester Hours Credit	Major Subject Hours Credit

Teaching Experience

Name and Address of School	Date	Number of Years	Number of Months	Nature of Work (if elementary, specify grade and/or subject, if secondary, the subject taught and any extra-curricular work handled.)	Reason for Leaving

Other Work Experience

Name and Address of Employer	Date	Number of months	Nature of Work	Reason for Leaving

Professional Information

1. Have you taken the complete battery of the National Teachers' Examination, CMEE or Praxis?

_____ (Yes/No)

_____ Test Taken

_____ Date Taken

A. If yes, list score(s): _____
(Before employment, your application must include a copy of the official scores from the National Teachers' Examination, CMEE or Praxis and a copy of your transcript.)

B. If yes, what was your area specialization? _____

C. If no, when do you plan to take either the part missed or the total battery? _____

2. What was your overall undergraduate grade point average? _____
(Before employment, your application must include an official copy of your college transcript.)

3. Have you been issued a valid (current) Mississippi Educator License? _____
(Yes/No)

A. If yes, what area(s) are you endorsed to teach? _____

B. If yes, what is the highest certification level held in a teaching area?
AAAA AAA AA A Subject/Area _____

4. Do you have experience in or qualifications to coach or direct? (Check):

Orchestra	_____	Dramatics	_____	Track	_____
Band	_____	(State Production)	_____	Tennis	_____
Chorus	_____	Football	_____	Soccer	_____
Debate	_____	Basketball	_____	Volley ball	_____
Declamation	_____	Baseball	_____	Golf	_____
Softball	_____	Other	_____		

5. What date could you begin work here? _____

6. Do you speak any language other than English? _____

7. List the educationally related honors you received during your undergraduate years or have received since graduation: _____

8. Add any information, which you believe, will assist in arriving at a true estimate of your qualifications.

8. **References:** These should be persons knowledgeable of your qualifications for the position you seek. Please include superintendents and principals under whom you have taught.

References' Full Name	Complete Address & Zip Code	Occupation/ Phone (include area code)
1.		
2.		
3.		
4.		

9. Have you ever been asked to resign, been discharged or failed to be re-employed? ___Yes ___No
If yes, give details: _____

10. Have you ever been convicted of any offense other than a simple traffic violation? ___Yes___No
If yes, give details: _____

*Gulfport School District does not discriminate on
the basis of sex, race, religion, disability,
national origin, or veteran status*

Read carefully and sign the following statement.

By my signature, I attest that the information contained in this application is true and is accurately presented.

Date

Signature