Montgomery County School District Office of Human Resources

Office of Human Resources P. O. Box 687 Winona, MS 38967

Non-Licensed Employment Application

			Date of Application	
Name of Applicant(First Name)	_/(Middle	e Name)	/(Last Name)
Address			(2001)	,
City		State	Zip	
Home Phone Number ()	Dayt	Daytime Phone Number ()		
Email address		/ Social Security Number//		
Position Desired: Teacher Assistant Secretary Library Assistant Cafeteria Maintenance Other	y Bus Driver	Bus Driver If selected for position, which school would you prefer?		
If you are applying for a teacher assistant or library have passed all three sections of the ACT Workke Workkeys must be attached to this application.				
Educati	onal Inform	nation		
High School, College/Vocational School (Name & Location)) Dates A	Attended To	Degree/Diploma/GED	Date Graduated
Employi	ment Infori	mation		
Are you currently employed? Yes No If yes, wh	ere			
May we inquire of your present employer? Yes . I	No			
Previous Application on File: Yes. No Have you	ever been emp	loyed by thi	is school district? Yes	No
If yes, give name of school		_ Date of en	nployment: From	To
Are you related to anyone now working for Montgo	mery County S	chool Distric	ct?_Yes_No	
If yes, give name of relative, relationship and name	e of school			
			(Name of relative)	
(Relationship)			(Name of School)	

		nployment History	(List chronologically)			
	Company Name:			Telephone #	Telephone #	
	Address:		Dates of E	Dates of Employment:		
				From:	To:	
1	Name of Supervisor:			Reason for	Leaving:	
	List job title and briefly describe work	responsibilities:				
	Company Name:			Telephone #	Telephone #	
	Address:			Dates of E	Dates of Employment:	
			From:	To:		
2	Name of Supervisor:			Reason for	I Leaving:	
	List job title and briefly describe work i	responsibilities:				
	Company Name:			Telephone #	<u>+</u>	
			()			
	Address:			Employment:		
3				From:	То:	
	Name of Supervisor:			Reason for	Leaving:	
List job title and briefly describe work responsibilities:						
	Company Name:			Telephone #	Telephone #	
	Address:			Dates of I	Dates of Employment	
				From:	To:	
4	Name of Supervisor:			Reason for	Leaving:	
	List job title and briefly describe work i	responsibilities:				
		Deferen	•••			
Voi	are to send the three (3) refere	Reference inquiry forms to three		ms are to be s	ent directly	
100			ddressed envelope with each			
	reference to ensure that the o			e that reference	e inquires	
	Give below the name of	will be held in three (3) persons not related to v	confidence. ou whom you have known at least o	ne (1) vear		
	Name and Title of Reference	Business/Organization	Address	Phone	Years	
				Number	Known	
1						
2						
3				-		

Have you ever failed to be re-employed? Yes No If yes, where?	
State reason:	
Have you ever been convicted of any offense other than a misdemeanor? Yes No	
If yes, explain	
List any experience(s) you have had that will help you contribute to this position.	
I understand that Montgomery County School District reserves the right to verify all application and that any false statement(s) or failure to disclose information may be me from employment.	
Applicant's Signature Date	
APPLICATION WILL REMAIN ACTIVE FOR ONE YEAR FROM DATE RECEIVED. The School District adheres to the principle of equal educational and employment opportunity w sex, age, color, creed or national origin. This policy includes the qualified handicapped and activities supported by the Montgomery County School District.	vithout regard to race,
Date Interviewed Position Desired	
Interviewed By:	
Comments:	
Date Interviewed Position Desired Interviewed By:	
Comments:	

Montgomery County School District Non-Licensed Applicant Reference Inquiry Survey

Date:/			
To:		Return Reference To: Montgomery County School District Department of Human Resources P. O. Box 687 Winona, MS 38967	
RE: Name of Applicant	//	umber Position Desired	
The above named person has applied for a polar reference. I would appreciate your response might be able to provide me concerning this a	sition in the Montgomery Coun	nty School District. He/She has listed yo ase include any relevant information that	
A. GENERAL CHARACTERISTICS: Please	e rate by checking the most ap	ppropriate response.	
Exhibits discipline and tact Supe	erior Good Average Fair U	Insatisfactory. No Information	
Displays good personal grooming Supe	erior Good Average Fair U	Insatisfactory. No Information	
Reliability Supo	erior Good Average Fair U	Unsatisfactory. No Information	
Attendance Record Supe	erior Good Average Fair U	Insatisfactory. No Information	
Work Habits Supe	erior Good Average Fair U	Jnsatisfactory. No Information	
Use of sound judgment Supe	erior Good Average Fair U	Jnsatisfactory. No Information	
Character Supe	erior Good Average Fair U	Jnsatisfactory. No Information	
Works well with others Supe	erior Good Average Fair U	Jnsatisfactory. No Information	
Cooperation Supe	erior Good Average Fair U	Jnsatisfactory. No Information	
Communication skills are effective: 1. Orally Super	erior Good Average Fair U	Jnsatisfactory. No Information	
2. Written Supe	erior Good Average Fair U	Insatisfactory. No Information	
B. REMARKS: Please make any additional this applicant.			of
Please indicate the length of time you have kn	own applicant. From	To	
In what capacity did you know this applicant?		Would you hire/rehire? Yes N	lo
Signature		Date	
Title			

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Office of Human Resources
P. O. Box 687
Winona, MS 38967
662-283-4533 / Fax 662-283-4584

PERMISSION FOR MANDATORY BACKGROUND CHECK

Date
I give my permission for the Montgomery County School District to conduct a background screening check with the law enforcement, the Child Abuse Central Registry, previous employers, and any other persons to determine my suitability for employment. I understand that this permission is part of my application for a position with the Montgomery County Schools. I further understand that my employment is contingent upon the information obtained in a background check and my contract or at-will agreement is voidable based on this information.
Please Print:
Name:
Address:
Social Security Number:
Date of Birth:
Signature

Montgomery County School District Human Resources Department

THEFT OF PROPERTY FORM

Please Print:
Employee Name
The theft, misappropriation, or any other unauthorized removal of property belong to the Montgomery County School District is strictly prohibited and will not be tolerated.
Any Montgomery County School District employee who removes, steals, misappropriates, or participates in the removal, theft, or misappropriation of any property belonging to the Montgomery County 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