

Application for Employment
FORREST COUNTY AGRICULTURAL HIGH SCHOOL
215 Old Highway 49 East
Brooklyn, MS 39425
(601) 582-4102

PERSONAL DATA:

Name: _____		
(Last)	(First)	(Middle)
Social Security #: _____	Phone #: _____	
US Citizen Yes No		
Present Address: _____ _____		
Permanent Address: _____ _____		

EMPLOYMENT DATA:

Position (s) Applying for: _____
Area (s) of Licensure: _____
Circle One: A AA AAA AAAA
Please list any extra-curricular activities which you are capable of leading: _____ _____

REFERENCES: List Principals, Teachers, College Professors, or others that could give information regarding your fitness for the position you seek.

Name	Address/Telephone	Occupation

EMPLOYMENT INFORMATION:

<p>Are you presently employed? Yes No If yes, where?</p>
<p>What is your current salary? _____ Are you available for an interview? _____ Date available for employment: _____</p>
<p>List any hobbies or special talents that you have:</p>
<p>List any other information that you feel would assist us in making a true assessment of your qualifications:</p>
<p>Have you ever been fired or asked to resign? If yes, explain.</p>

BACKGROUND INFORMATION:

Have you ever been convicted of an offense other than a misdemeanor, pled guilty, or entered a plea of nolo contendere to a felony as defined by federal or state law?

YES NO

If yes, you must disclose the following:

Place Arrested	State	Date	Charge(s)	Disposition(s)
----------------	-------	------	-----------	----------------

Have you ever been convicted, pled guilty, been found guilty, or entered a plea of nolo contendere to a sex offense as defined by federal or state law? YES NO

If yes, you must disclose the following:

Place Arrested	State	Date	Charge(s)	Disposition(s)
----------------	-------	------	-----------	----------------

Have you ever had been denied a teaching license or had your license suspended, and or revoked by another state? YES NO

If yes, you must disclose the following:

State: Year: Reason:

Are you currently addicted to or dependent on alcohol or any other habit forming drug? YES NO

Are you in good health? YES NO If no, explain:

I certify that I have answered each and every section of this application truthfully and completely. I understand that any incomplete or false information on this application may be just cause for rejection of my application for employment or dismissal in the event this application results in employment. If employed, I agree to abide by the rules and regulations as set forth by the Forrest County Agricultural High School as necessary to the proper conduct of its business.

Signature of Applicant

Date

We consider applicants for all positions without regard to race, color, religion, creed, national origin, age, and disability, marital or veteran status.

An Equal Opportunity/Affirmative Action/Veteran's Preference Employer

Forrest County Agricultural High School

ELIZABETH YANKAY
SUPERINTENDENT

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

From: Elizabeth Yankay, Superintendent
Forrest County Agricultural High School
215 Old Highway 49 East
Brooklyn, MS 39425
601-582-4102

(Printed) Applicant's Full Name (list maiden name & list any aliases)

Social Security Number: _____ Date of Birth: _____
(Requesting Agency should verify by viewing the applicant's Drivers License and Social Security card)

Physical Address: _____

By signing this form, I give the above named agency permission to request and an MDHS Child Abuse/Neglect Central Registry background check. I understand that this information will be used only for employment purposes and will not be re-disseminated to other persons or used for other purpose.

_____ Date: _____
Applicant signature

I have witnessed the applicant's signature and the information is true and attested by my viewing of the applicant's Social Security card and Drivers License. I understand that this information must be kept confidential with my agency.

Signature of Witness: _____ Date: _____
(Witness must be a representative of the requesting agency)

This section to be completed by MDHS Office

_____ No identifying information was found in the Central Registry

_____ The following information was found in the Central Registry

Signature of MDHS Representative

Date

TO: Applicant
FROM: Elizabeth Yankay, Superintendent
RE: Background Check

The Forrest County Agricultural High School is required to obtain current criminal records, background checks and current child abuse registry checks. This criminal record information and registry checks must be on file for any new hires applying for employment as a licensed or non licensed employee at a school not previously employed in any such school district prior to July 1, 2000.

In order to determine the applicant's suitability for employment, the applicant shall be fingerprinted. If no disqualifying record is identified at the state level, the fingerprinting shall be forwarded by the Department of Public Safety to the FBI for a national criminal history record check. **THE FEE FOR FINGER PRINTING AND CRIMINAL HISTORY RECORD CHECK SHALL BE PAID BY THE APPLICANT, IN THE AMOUNT OF \$32.00.**

If such finger printing or criminal record checks disclose a felony conviction, guilty plea or plea of nolo contendere to a felony, If possession or sale of drugs, murder, manslaughter, armed robbery, rape, sexual battery, sex offense listed in Section 45-31-3(i), child abuse, arson, grand larceny, burglary, gratification of lust or aggravated assault which has not been reversed on appeal or for which a pardon has not been granted, the new hire shall not be eligible to be employed at such school. **ANY EMPLOYMENT CONTRACT FOR A NEW HIRE EXECUTED BY THE SUPERINTENDENT OF THE LOCAL SCHOOL DISTRICT SHALL BE VOIDABLE IF THE NEW HIRE RECEIVES A DISQUALIFYING CRIMINAL RECORD CHECK.**

I understand that my employment is pending a clear criminal record and child abuse registry check.

Applicant Signature

Print Name Here

Date

