



North Tippah School District 20821 Hwy 15 Falkner, MS 38629

Phone: 662-837-8450 Fax: 662-837-8455

Application for Non-Certified Position

Name:	Date:				
Address:	Zip:	Email:			
S.S. #	Telephone:				
Please check position applying for:					
Secretary:	Custodian:				
Substitute Teacher:	Teacher Assistant:				
Cafeteria Substitute:	Cafeteria Worker:				
Bus Shop Worker:	Bus Shop Mechanic:				
Bus Driver:	Technology:				
the Workkeys Test. ** In order to be considered for emplo passed a Bus Driver's License, class B Have you? Yes No			•		
Are you able to perform all the respons are making application? Yes		a part of the J	position for which you		
If no, explain					
When could you begin work?					
		Check	c One		
I agree to a child abuse registry check.		Yes	No		
I agree to a criminal records backgroun	nd check via				
Fingerprint Card.		Yes	No		
I agree to pay a 32.00 fingerprinting fe	e for the				
national criminal history record check.		Yes	No		

The North Tippah School District does not discriminate on the basis of race, sex, religion, or national origin.

Note: This application will be kept on file for one year.

Note: The applicant should exercise the greatest care in preparing this application. Information given herein becomes a legal record in case of election. Please do not omit any items.





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Education

Schools or Colleges Attended:	Dates:	Degree/Diploma:
		/
		/
		/
	Work Experience	
Employed By:	Dates:	Nature of Work:
References: These should be peop the position you seek.	ple qualified to give any informat	ion to show your fitness for
Name:	Address:	Occupation:
Note: The information given on t	his application is true and correct	to the best of my knowledge.
I understand that any false inform	nation may invalidate the applicat	nt's employment contract.
Signature:	D	ate:

Applicant will not write in spaces below.

Date Hired	School Year	Salary	Position Assigned	School