

COAHOMA COUNTY SCHOOL DISTRICT
Application for Interim Superintendent of Schools

(Please type or print your responses and fully respond to each item.)

I. BASIC INFORMATION

Name: _____
(Last) (First) (Middle)

Home Address: _____

Business Address: _____

Phone Number: _____
(Home) (Work) (Cell)

E-Mail Address: _____

II. CURRENT EMPLOYER

Name: _____

Address: _____

Telephone Number: _____

III. CURRENT POSITION

Title: _____

Salary: _____ Are you under contract at present? Yes No

Contract expiration date with current district, if applicable: _____

IV CURRENT SCHOOL DISTRICT INFORMATION

1. Briefly describe the school district or organization where you are currently serving.

2. Budget of current school district: _____

3. Number of schools in your current school district: _____

4. Number of employees in your current school district: _____

5. Total enrollment of the school district in which you are currently employed: _____

6. Racial composition of the school district in which you are currently employed:

%Black____ %Hispanic____ %White____ %Other____

7. Do you hold or are you entitled to hold a MS administrator's license for the State of Mississippi which would enable you to serve as a superintendent? Yes No

- License Number: _____

- Date of Issuance: _____

V. EMPLOYMENT HISTORY

List employment history (within and outside the field of education) beginning with your present position. Put the calendar year(s) you were employed in each position (*ex.: 2014-2017*) and your specific job title as reported to your state department of education (*ex.: Superintendent, Asst. Superintendent, Federal Programs Director, Special Education Director, Principal, Asst. Principal, Teacher, etc.*).

| Years Employed | Employer Address and Phone | Job Title |
|----------------|---------------------------------|-----------|
| | Employer: Address: Phone: | |
| | Employer: Address: Phone: | |
| | Employer: Address: Phone: | |
| | Employer: Address: Phone: | |
| | Employer: Address: Phone: | |
| | Employer: Address: Phone: | |
| | Employer: Address: Phone: | |

VI. EDUCATION PREPARATION

Please list entries beginning with the most recent information.

| Degree | Year degree received | College/University from which degree was received | Years Attended | Major |
|--------|----------------------|---|----------------|-------|
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VII. REFERENCES

List four persons (name, address, and telephone number) qualified to provide information and opinions concerning your professional abilities, achievements, competence, character, and work habits. **Have your references send letters directly to Mr. Patrick Campbell, 1555 Lee Drive, Clarksdale, MS 38614 or PCampbell@coahoma.k12.ms.us**

1. _____

2. _____

3. _____

4. _____

VIII. OTHER

1. Have you ever been terminated, non-renewed, or asked to resign from any position?

Yes No

- If yes, please explain.

2. Has your teacher's or administrator's license or certificate ever been suspended or revoked? Yes No

- If yes, list what license or certificate, the date, and the reasons (attach a separate sheet if necessary)

- Has that license/certificate been reinstated and if so, when?

3. Have you ever been convicted of, or pleaded *no contest* to, a felony or misdemeanor (other than traffic violations)? Yes No

- If yes, please explain.

4. Have you ever had a felony conviction expunged? Yes No

- If yes, please explain.

5. Have you ever been charged with child abuse or sexual misconduct? Yes No

- If yes, please explain.

6. Have you ever been charged with domestic abuse or domestic violence?

Yes No

- If yes, please explain.

7. Has a charge ever been filed against you with the Mississippi Department of Education (or such equivalent department of any other state)? Yes No

- If yes, please explain.

8. Have you ever served in the military? Yes No

• If yes, did you receive an honorable discharge? Yes No

- If no, please explain.

9. Do you agree to submit to a medical examination, drug screening, and psychological screening or evaluation and to have the results furnished to the Coahoma County School District at the cost of the Coahoma County School District as part of the application process and to execute such documents and releases as may be required for this purpose?

Yes No

10. If you are among the finalists, would you object to a Board visit to your community?

Yes No

- If yes, please explain.

ACKNOWLEDGEMENT AND AUTHORIZATION OF APPLICANT

I hereby certify that the information provided by me in the application is true and correct to the best of my knowledge. I understand that at some point in the selection process the information contained in the application may be made available to the general public. I understand that the facts set forth herein shall be subject to verification by the Coahoma County School District.

I hereby authorize the Coahoma County School District to conduct such background checks as it deems desirable to include, but not be limited to, inquiries to all law enforcement agencies, the Child Abuse Center Registry, Mississippi Sex Offenders Registry (or such registry of any other state), previous employers, references, credit bureaus, such other persons, businesses, bureaus, or agencies deemed appropriate by Coahoma County School District to determine my qualifications and ability for the position of Superintendent of the Coahoma County School District. I further authorize the Coahoma County School District to conduct the background checks described herein.

Should any information given by me on this application be false or incorrect, I understand, acknowledge, and agree that I may be eliminated from consideration for this position and should the same be discovered after I have been employed then I may be terminated from employment with the Coahoma County School District.

This application will not be considered complete without a signature. Your signature certifies that, to your best knowledge and belief, the information provided herein is complete and true and that you meet the board's published criteria.

(Signature of Applicant)

(Date)

Please forward this application, along with a letter of interest, a current résumé, an official transcript from each college or university you attended, and a copy of your administrative license to:

**Coahoma County School District
ATTN: Mr. Patrick Campbell
1555 Lee Drive, Clarksdale, MS 38614**

**Emailed application packages should be sent to: PCampbell@coahoma.k12.ms.us
Subject line "Coahoma County Interim Superintendent Search Application"**

Emailed application package documents must be in PDF format.

E-Transcripts will be accepted.