Jackson State University Jackson, Mississippi 39217

APPLICATION FOR EMPLOYMENT

(Instructional Personnel)

	Date of Application		20		
I. PERSONAL DATA					
Name					
Last	First		Midd	le	
Present Address:	7/				
Street	City		State		Zip Code
Telephone					
Permanent Address:	V 7				27 y
Street	City		State		Zip Code
Telephone					
Are you a U.S. Citizen?	If not, in	dicate visa status			
Social Security No.					
Present Position or status		Present S	alarv		
Reason for leaving present position					
When will you be available for employm	ent?	Least sa	lary you would	consider	
This next questions are necessary to com INFORMATION	ply with federal requireme	nts: THERE SHALL	BE NO DISCR	IMINATORY	USE OF THIS
RACE American Indian	Asian Black	Hispanic	White	Other_	
Date of Birth:	Sex:	Male	Female		
If you are handicapped and require specia	al accommodations, please	explain in the space	below:		
					- 35
MILITARY SERVICES	=				65.
DATES OF ACTIVE DUTY: From		to	_		
N	Month Day	Year	Month	Day	Year
Branch of Service		_Rank at Time of D	ischarge		

			7 2				
						1 12 2	
List other act		ich you are specially prepared	I and which	you would be willing	to direct (Club v	vork, publication	s,
III. EDUCA	TION						
	Name	School or Institution City	State	Dates Attended From – To (Give Mo. & Yr.)	Year Graduated	Diploma Or Degree	Major
Senior High	-						
College or University							
Graduate							
School							
School							

Please have your college or university forward your transcripts to the Office of the Dean of the Respective College

IV. EXPERIENCE

Teaching and Administrative Experience: (List in chronological order, present position first.)

Name of Institution	City and State	Rank, Title, or Position	Immediate Supervisor	Dates From –To	Subject	Total Months
	*		2			

Other Professional Experience:	(List in chronological order such activities as special i	research or committee work, leadership
activities, organization work.)		

Name of Experience Dates From – To			Full Name, Title, and Address of the Person To Whom you were Responsible			
				1		
ravel: (Give places visited and	dates)	l .		1		
ther Work Experience: (List in muneration.)	chronological order bu	siness, trade, and summer occupations	for which you receive	•		
Firm or Institution	City and State	Full Name, Address of the Person To Whom you were Responsible	Position and Nature of Work	Dates From - To		
hilosophy of Higher Education	(State your personal pl	nilosophy. Attach additional sheets if n	nore space is needed.)			
. ACTIVITIES, MEMBERSHI			,			
ollege or University Extracurricul	ar Activities.					
rofessional Organizations:						
		*				

Community and Service Organiz	ations:			
High School	HONORS AND AWARI College Com	OS amunity	Other	
Publications: (Gives title, Publis	hers, and dates.)			
Interests, Skills and Hobbies: VI. REFERENCES (College or	University)			
Position	Name	Address: Street, City and State		
Faculty Adviser				
Professor in Major Area				
Professor in Minor Area				
Other			·	
I hereby certify that the information	herein is a true and complete statement of r		ssional record to date.	
 Date YOU requested your co Date YOU requested your pl 	ION OF YOUR CANDIDACY, PLEASE College or university to send us your transcript accement office to send us your references ice of the Dean, (Appropriate College), Jack	OMPLETE THE FOL ts MonthD MonthD	LOWING: DayYear DayYear	
are considered without regards to ra renders the person incapable of doin In addition, Jackson State Un	AN EQUAL OPPORTUNITY EM In Equal Opportunity Employer. All applications, sex, religion, national origin, age, or phying the job). In Equal Opportunity Employer. All applications, sex, religion, national origin, age, or phying the job). In Equal Opportunity Employer. All applications, sex, religion, age, admits and provides services and origin, age, handicap, veteran or other sta	ants for faculty, staff, a visical or mental handic	ap (except where such handicap	

Revised Fall, 2008