



**1. In-State Applicants Only**

**4. MISSISSIPPI SUPERINTENDENT QUALIFICATION CRITERIA**

*Mississippi law requires that a superintendent hold a valid administrator's license issued by the State Department of Education and shall have had classroom or administrative experience of not less than six (6) years which shall include meeting one of the criteria below or has served as a superintendent or assistant superintendent within the last five years. (MS Code of 1972 37-9-13)*

*Please check the box (es) that applies to how you meet the qualifications and complete the appropriate information.*

- I have served as a superintendent or assistant superintendent within the last five (5) years.**

District	Position <i>Superintendent or Assistant Superintendent</i>	MDE Accountability Rating (A-F) <i>(Not required by law, for school board information)</i>					
		2017-18	2016-17	2015-16	2014-15	2013-14	2012-13
<i>Example: Magnolia School District</i>	<i>Superintendent</i>	<i>A</i>	<i>B</i>	<i>B</i>	<i>C</i>	<i>C</i>	

- I have served as a school building principal for at least three (3) years in a school with an "A" or "B" accountability rating.**

District Name School Name	MDE Accountability Rating (A-F) while Principal								
	2016-17	2015-16	2014-15	2013-14	2012-13	2011-12	2010-11	2009-10	2008-09
<i>Example: Magnolia School District Magnolia Elementary</i>	<i>A</i>	<i>B</i>	<i>B</i>	<i>B</i>					

- I have served as a school building principal for at least three (3) years in a school that increased its accountability rating by a letter grade during the period in which I was employed as principal at the school. (The accountability rating increase must be maintained for three years – MS Attorney General Opinion to Dorrill 6/2/2017)**

District Name School Name	MDE Accountability Rating (A-F) while Principal								
	2016-17	2015-16	2014-15	2013-14	2012-13	2011-12	2010-11	2009-10	2008-09
<i>Example: Magnolia School District Magnolia Elementary</i>	<i>B</i>	<i>B</i>	<i>C</i>	<i>D</i>					

I certify that the information provided is true and can be verified through the Mississippi Department of Education.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

**2. Out-of-State Applicants Only**

- I have served as a superintendent or assistant superintendent within the last five (5) years.**

State District	Position <i>Superintendent or Assistant Superintendent</i>	Comparable Accountability Rating <i>(Not required by law, for school board information)</i>					
		2017-18	2016-17	2015-16	2014-15	2013-14	2012-13
<i>Example: Alabama Magnolia School District</i>	<i>Superintendent</i>						

- I have served in a school in another state with comparable accountability ratings (“A” or “B”) which shall be verified by the Mississippi Department of Education.**

State District Name School Name	Comparable Accountability Rating								
	2016-17	2015-16	2014-15	2013-14	2012-13	2011-12	2010-11	2009-10	2008-09
<i>Example: Alabama Magnolia School District Magnolia Elementary</i>									

- I have served in a school in another state with comparable accountability ratings improvement which shall be verified by the Mississippi Department of Education.**  
*(The accountability rating increase must be maintained for three years – MS Attorney General Opinion to Dorrill 6/2/2017)*

State District Name School Name	Comparable Accountability Rating								
	2016-17	2015-16	2014-15	2013-14	2012-13	2011-12	2010-11	2009-10	2008-09
<i>Example: Alabama Magnolia School District Magnolia Elementary</i>									

I certify that the information provided is true and can be verified through the Mississippi Department of Education.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date



## 6. 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.*).

Dates 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:	

## 7. EDUCATION PREPARATION

List entries beginning with the most recent information.

Degree	Year degree received	College/University from which degree was received	Years Attended	Major

Name on the transcript if different from your current name: \_\_\_\_\_

## 8. 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 Dr. (Mrs.) Tommye Henderson, P.O. Box 178, Clinton, MS 39060 or [thenderson@msbaonline.org](mailto:thenderson@msbaonline.org).**

1. \_\_\_\_\_  
\_\_\_\_\_
2. \_\_\_\_\_  
\_\_\_\_\_
3. \_\_\_\_\_  
\_\_\_\_\_
4. \_\_\_\_\_

## 9. 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 Jackson County School District at the cost of the Jackson 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 Jackson County School District.*

*I hereby authorize the Jackson 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 the Jackson County School District to determine my qualifications and ability for the position of Superintendent of the Jackson County School District. I further authorize the Jackson 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 Jackson 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:***

**MSBA Superintendent Search  
Jackson County School District  
ATTN: Dr. Tommye C. Henderson  
P.O. Box 178  
Clinton, MS 39060**

**Emailed application packages should be sent to: [thenderson@msbaonline.org](mailto:thenderson@msbaonline.org)  
Subject line "Jackson County Superintendent Search Application"**  
*Emailed application package documents must be in PDF format. E-Transcripts will be accepted.*