

Newton County Academy 14602 Hwy 15 South Decatur, MS 39327

Steve Nelson Headmaster

Office # 601-635-2756 Fax # 601-635-3525

nca@ncagenerals.org

TEACHER APPLICATION

Date				
Name			SS#	
Address			City	State
Zip	Phone		Email	
			olication: (If applying for prefer junior high or high	elementary give the grades school)
Qualifications:				
Birthdate:		Single	Married	
College Degree	e Yes No _			
College Degree	e(s)			
College Major			Minor	
List any postgra	aduate work			
	ficate do vou hold			

In applyi	ng for secondary position, would you be willi	ng to assist with the school annual?
Serve as	a class sponsor in grades 7 th – 12 th Yes	No
	ast three teaching positions held and give the or headmaster/grade or subject taught/dates or	following: School name and address/name of of employment at the school:
1		
2		
3		
	mber of years teaching experience	
	type of job you have held other than teaching	
Do you h	nold a Bus Driver's License?	
	copy of your transcript and teacher's license. return in person.	Mail OR email application to address on top of
Signature	e	Date