



Newton County Academy
14602 Hwy 15 South
Decatur, MS 39327

Jerry Crowe
Headmaster

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TEACHER APPLICATION

Date _____

Name _____ SS# _____

Address _____ City _____ State _____

Zip _____ Phone _____ Email _____

Grade or position for which you are making application: (If applying for elementary give the grades applying for, if secondary specify whether you prefer junior high or high school)

Qualifications:

Birthdate: _____ Single _____ Married _____

College Degree Yes _____ No _____

College Degree(s) _____

College Awarding Degree(s) _____

Date Graduated or Date Last Attended College _____

College Major _____ Minor _____

List any postgraduate work _____

What type certificate do you hold _____

In applying for secondary position, would you be willing to assist with the school annual? _____

Serve as a class sponsor in grades 7th – 12th Yes _____ No _____

List the last three teaching positions held and give the following: School name and address/name of principal or headmaster/grade or subject taught/dates of employment at the school:

1. _____

2. _____

3. _____

Total number of years teaching experience _____

List any type of job you have held other than teaching _____

Do you hold a Bus Driver's License? _____

Attach a copy of your transcript and teacher's license. Mail OR email application to address on top of page, or return in person.

Signature _____ Date _____