

REFERENCES

NAME	COMPANY	POSITION	TELEPHONE #

I hereby certify that the information presented in this application is true, accurate, and complete. I understand that any misrepresentation, falsification, or omission of the facts on this application will be sufficient cause for disqualification, non-employment, or dismissal from employment, and will constitute a release to the employer for liability. If employed, I agree to abide by all policies as set forth by the Benton County School District. I hereby extend the right of the Benton County School District, or any of its agents, to contact any and all previous employers, references, health care providers, hospitals, educational institutions attended, court officials, and law enforcement authorities who might have knowledge of my credentials, and I waive all rights pursuant to PL 93-380. I have read the above and understand the pre-employment procedures of the Benton County School District.

Signature of Applicant

Date

FOR OFFICE USE ONLY

Individual Reference Forms

Resume

Social Security Card

Driver's License or Birth Certificate

PERS

Form W-4

Insurance Forms

Background Check

***The Benton County School District is accredited by the State of Mississippi and
The Southern Association of Colleges and Schools***