

JACKSON COUNTY SCHOOLS
PERSONNEL OFFICE
P.O. BOX 770
RIPLEY, WV 25271
(304) 372-7300/372-7304
FAX (304) 372-7312

OFFICE USE ONLY
DATE RECEIVED _____
SENIORITY DATE _____
DIPLOMA/GED _____
COMPETENCY TEST RESULTS: P/F _____

APPLICATION FOR POSTED SCHOOL SERVICE PERSONNEL JOB VACANCY

THIS FORM MAY BE USED TO APPLY FOR ANY POSTED SERVICE PERSONNEL POSITION. IT MUST BE SUBMITTED TO THE PERSONNEL OFFICE WITHIN THE POSTED TIME PERIOD.

- 1. NAME _____ POSTING NUMBER _____
- 2. POSITION REQUESTED _____ SCHOOL/DEPT. _____
- 3. ARE YOU CURRENTLY EMPLOYED BY THE JACKSON COUNTY BOARD OF EDUCATION? ____ YES ____ NO
- 4. IF YES, LOCATION AND CURRENT ASSIGNMENT: _____ SENIORITY DATE _____
- 5. IF YOU DO NOT HOLD CLASSIFICATION IN THE POSITION YOU ARE REQUESTING, HAVE YOU EVER HELD A POSITION IN THE CLASSIFICATION? ____ YES ____ NO.
- 6. HAVE YOU PASSED THE WEST VIRGINIA EDUCATION COMPETENCY TEST IN THE CLASSIFICATION FOR WHICH YOU ARE APPLYING? ____ YES ____ NO. IF YES, PLEASE ATTACH VERIFICATION.
- 7. IF YOU ARE APPLYING FOR MORE THAN ONE POSTED VACANT POSITION, PLEASE LIST THE PRIORITY OF THIS REQUEST. PRIORITY NUMBER _____.
- 8. (AIDES ONLY) HAVE YOU TRANSFERRED INTO A NEW POSITION OF EMPLOYMENT DURING THIS HALF OF THE SCHOOL TERM? ____ YES ____ NO
- 9. (PARAPROFESSIONAL ONLY) DO YOU HOLD A PARAPROFESSIONAL CERTIFICATE? ____ YES ____ NO
IF NO, ARE YOU ELIGIBLE FOR A PARAPROFESSIONAL CERTIFICATE AS PER THE REQUIREMENTS ON THE WVDE APPLICATION FOR PARAPROFESSIONAL CERTIFICATE (FORM 40)? ____ YES ____ NO

NUMBERS 9 - 11: NEW EMPLOYEES ONLY:

- 10. DO YOU HOLD HIGH SCHOOL DIPLOMA OR GED? ____ YES ____ NO. IF NO, ARE YOU CURRENTLY ENROLLED IN A GED PROGRAM? ____ YES ____ NO. IF YES, WHERE? _____
- 11. DO YOU HAVE A CURRENT (WITHIN ONE YEAR) APPLICATION ON FILE? ____ YES ____ NO. IF NO, COMPLETE AN APPLICATION AND RETURN IT TO THE PERSONNEL OFFICE WITH THIS FORM.
- 12. PRESENT EMPLOYER AND POSITION HELD _____

THE INFORMATION PROVIDED IN THIS APPLICATION IS TRUE, CORRECT AND COMPLETE.

SIGNED _____ DATE _____
ADDRESS _____
CITY _____ COUNTY _____ STATE _____ ZIP _____
HOME PHONE NUMBER _____ WORK PHONE NUMBER _____

