

OCEAN SPRINGS SCHOOL DISTRICT



**2300 GOVERNMENT STREET
OCEAN SPRINGS, MS 39566-7002
www.ossdms.org**

We appreciate your interest in the Ocean Springs School District. We will not discriminate on the basis of race, religion, color, national origin, sex, age or handicap.

JOB INTERESTS SUMMERHIRES: _____ VOLUNTEERS: _____

INDEPENDENT CONTRACTOR: _____ ATHLETIC WORKER: _____

PERSONAL DATA

LAST NAME _____ FIRST _____ MIDDLE INITIAL _____

MAILING ADDRESS (STREET, STATE, ZIP CODE)

SOCIAL SECURITY # _____ DATE OF BIRTH (MTH/DAY/YEAR) _____

DRIVER LICENSE # _____ PHONE NUMBER# _____

MALE _____ FEMALE _____ E-MAIL _____

HAVE YOU BEEN EMPLOYED WITH OSSD BEFORE? YES ___ NO ___

APPLICATION DATE: _____

SIGNATURE: _____

PLEASE PROVIDE A COPY OF YOUR DRIVER'S LICENSE AND SOCIAL SECURITY CARD WITH FORM. (Please contact the Personnel Office for Fingerprints and Background information, 228-875-7721)
