

OCEAN SPRING SCHOOL DISTRICT
Human Resources Office
2300 Government St. Ocean Springs, MS 39564
Telephone: (228) 875-7706 Fax: (228) 875-1775

VERIFICATION OF PRIOR EMPLOYMENT

APPLICANT DIRECTIONS: Fill out the information above the solid line. Mail or present this form to the district(s) where you have previously been employed, so that they can verify your teaching/administrative experience.

My name at the time of employment was: _____

Social Security Number: _____ Telephone Number: _____

My employment in your system was during the following school session(s):

I taught at the following school(s) in your district:

Signature: _____



This is to certify that _____ was employed in the _____ school system as follows:

School Session	Position/Subject or Grade	Number of days on contract	Number of contract days worked	Please check	
				Half – Time	Full-Time

If this employee completed the Teach Mississippi Institute (TMI) program indicate completion of the appropriate Level:

- TMI 1 TMI 2

Signed: _____ Title: _____

Date: _____ Phone Number: _____

Please complete and mail to: **Ocean Springs School District—Human Resources Office**
2300 Government St. Ocean Springs, MS 39564
Or Email to mbeidelman@ossdms.org