

# RANKIN COUNTY SCHOOL DISTRICT

## *Application for Superintendent of Education*

(Please **type** your responses and fully respond to each item)

## 1. BASIC INFORMATION

Name: \_\_\_\_\_  
                     *(Last)*                         *(First)*                         *(Middle)*

Home Address: \_\_\_\_\_  
(City)(State)(Zip Code)

Business Address: \_\_\_\_\_  
   *(City)*                                 *(State)*                 *(Zip Code)*

Telephone Number: \_\_\_\_\_  
(Home) (Work) (Cell)

E-Mail Address: \_\_\_\_\_

## 2. CURRENT EMPLOYER

Name: \_\_\_\_\_

Address: \_\_\_\_\_  
(City) (State)

Telephone Number: \_\_\_\_\_

### 3. CURRENT POSITION

Title: \_\_\_\_\_

Salary: \_\_\_\_\_ Are you under contract at present? \_\_\_\_ Yes \_\_\_\_ No

Contract expiration date with current district, if applicable: \_\_\_\_\_

# 1. In-State Applicants Only

## 4. MISSISSIPPI SUPERINTENDENT QUALIFICATION CRITERIA

*(MS Code of 1972 37-9-13 requires that a superintendent hold a valid administrator's license issued by the State Department of Education and shall have had classroom or administrative experience of not less than six (6) years which shall include meeting one of the criteria below or has served as a superintendent or assistant superintendent within the last five years. Please check the box (es) that applies to how you meet the qualifications and complete the appropriate information.)*

- ☐ I have served as a superintendent or assistant superintendent within the last five (5) years.

District	Position <i>Superintendent or Assistant Superintendent</i>	MDE Accountability Rating (A-F) <i>(Not required by law, for school board information)</i>					
		2018-19 2019-20	2017-18	2016-17	2015-16	2014-15	2013-14
<i>Example: Magnolia School District</i>	<i>Superintendent</i>	<i>A</i>	<i>A</i>	<i>B</i>	<i>B</i>	<i>C</i>	<i>C</i>

- ☐ I have served as a school building principal for at least three (3) years in a school with an "A" or "B" accountability rating.

District Name School Name	MDE Accountability Rating (A-F) while Principal										
	2018-19 2019-20	2017-18	2016-17	2015-16	2014-15	2013-14	2012-13	2011-12	2010-11	2009-10	2008-09
<i>Example: Magnolia District Magnolia Elementary</i>	<i>B</i>	<i>B</i>	<i>B</i>	<i>B</i>	<i>C</i>	<i>D</i>			<i>B</i>	<i>C</i>	<i>D</i>

- ☐ I have served as a school building principal for at least three (3) years in a school that increased its accountability rating by a letter grade during the period in which I was employed as principal at the school. *(The accountability rating increase must be maintained for three years – MS Attorney General Opinion to Dorrill 6/2/2017)*

District Name School Name	MDE Accountability Rating (A-F) while Principal										
	2018-19 2019-20	2017-18	2016-17	2015-16	2014-15	2013-14	2012-13	2011-12	2010-11	2009-10	2008-09
<i>Example: Magnolia District Magnolia Elementary</i>	<i>B</i>	<i>B</i>	<i>C</i>	<i>B</i>	<i>C</i>	<i>D</i>			<i>B</i>	<i>C</i>	<i>D</i>

- ☐ I certify that the information provided is true and can be verified through the Mississippi Department of Education.

Signature of Applicant

Date

## 2. Out-of-State Applicants Only

- ☐ I have served as a superintendent or assistant superintendent within the last five (5) years.

State District	Position <i>Superintendent or Assistant Superintendent</i>	Comparable Accountability Rating <i>(Not required by law, for school board information)</i>					
<i>Example: Alabama Magnolia School District</i>	<i>Superintendent</i>	<i>2018-19 2019-20 A</i>	<i>2017-18 A</i>	<i>2016-17 B</i>	<i>2015-16 B</i>	<i>2014-15 C</i>	<i>2013-14 C</i>

- ☐ I have served in a school in another state with comparable accountability ratings (“A” or “B”) which shall be verified by the Mississippi Department of Education.

District Name School Name	MDE Accountability Rating (A-F) while Principal											
Example: Magnolia District Magnolia Elementary	2018-19 2019-20 B	2017-18 B	2016-17 C	2015-16 B	2014-15 C	2013-14 D				2010-11 B	2009-10 C	2008-09 D

- ☐ I have served in a school in another state with comparable accountability ratings improvement which shall be verified by the Mississippi Department of Education.  
(The accountability rating increase must be maintained for three years – MS Attorney General Opinion to Dorrill 6/2/2017)

District Name School Name	MDE Accountability Rating (A-F) while Principal										
Example: Magnolia District Magnolia Elementary	2018-19 2019-20 B	2017-18 B	2016-17 C	2015-16 B	2014-15 C	2013-14 D	2012-13	2011-12	2010-11 B	2009-10 C	2008-09 D

I certify that the information provided is true and can be verified through the Mississippi Department of Education.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

## 5. CURRENT SCHOOL DISTRICT INFORMATION

1. Briefly describe the school district or organization where you currently work.
2. Budget of current school district: \_\_\_\_\_
3. Number of schools in your current school district: \_\_\_\_\_
4. Number of employees in your current school district: \_\_\_\_\_
5. Total enrollment of the school district in which you are currently employed: \_\_\_\_\_
6. Number of employees you supervise: \_\_\_\_\_
7. Racial composition of the school district in which you are currently employed:  
% Black\_\_\_\_\_ % Hispanic\_\_\_\_\_ % White\_\_\_\_\_ % Other\_\_\_\_\_
8. Do you hold or are you entitled to hold an administrator's license for Mississippi which would enable you to serve as a superintendent? \_\_\_\_ Yes \_\_\_\_ No
  - License Number: \_\_\_\_\_
  - Date of Issuance: \_\_\_\_\_

## 6. EMPLOYMENT HISTORY

List employment history (within and outside the field of education) beginning with your present position. Put the calendar year(s) you were employed in each position (*ex.: 2014-2017*) and your specific job title as reported to your state department of education (*ex.: Superintendent, Asst. Superintendent, Federal Programs Director, Special Education Director, Principal, Asst. Principal, Teacher, etc.*).

[illegible]

## 7. EDUCATION PREPARATION

List entries beginning with the most recent information.

Degree	Year degree received	College/University from which degree was received	Years Attended	Major

Name on the transcript if different from your current name: \_\_\_\_\_

## 8. REFERENCES

List four persons (name, address, and telephone number) qualified to provide information and opinions concerning your professional abilities, achievements, competence, character, and work habits. **Have your references send letters directly to Rankin County School District Care of: RCSD Board Secretary Tammie Richardson, 1220 Apple Park Place, Brandon, MS 39042 or email them to [rcsd-superintendentapp@rcsd.ms](mailto:rcsd-superintendentapp@rcsd.ms)**

1. \_\_\_\_\_  
\_\_\_\_\_
2. \_\_\_\_\_  
\_\_\_\_\_
3. \_\_\_\_\_  
\_\_\_\_\_
4. \_\_\_\_\_

## 9. OTHER

1. Have you ever been terminated, non-renewed, or asked to resign from any position?

\_\_\_\_\_ Yes \_\_\_\_\_ No

- If yes, please explain.

2. Has your teacher's or administrator's license or certificate ever been suspended or revoked? \_\_\_\_\_ Yes \_\_\_\_\_ No

- If yes, list what license or certificate, the date, and the reasons (attach a separate sheet if necessary).

- Has that license/certificate been reinstated and if so, when?

3. Have you ever been convicted of, or pleaded *no contest* to, a felony or misdemeanor (other than traffic violations)? \_\_\_\_\_ Yes \_\_\_\_\_ No

- If yes, please explain.

4. Have you ever had a felony conviction expunged? \_\_\_\_\_ Yes \_\_\_\_\_ No

- If yes, please explain.

5. Have you ever been charged with child abuse or sexual misconduct?

\_\_\_\_\_ Yes \_\_\_\_\_ No

- If yes, please explain.

6. Have you ever been charged with domestic abuse or domestic violence?

\_\_\_\_ Yes \_\_\_\_ No

- If yes, please explain.

7. Has a charge ever been filed against you with the Mississippi Department of Education (or such equivalent department of any other state)? \_\_\_\_ Yes \_\_\_\_ No

- If yes, please explain.

8. Have you ever served in the military? \_\_\_\_ Yes \_\_\_\_ No

- If yes, did you receive an honorable discharge? \_\_\_\_ Yes \_\_\_\_ No
- If no, please explain.

9. Do you agree to submit to a medical examination, drug screening, and psychological screening or evaluation and to have the results furnished to the Rankin County School District at the cost of the Rankin County School District as part of the application process and to execute such documents and releases as may be required for this purpose?

\_\_\_\_ Yes \_\_\_\_ No

10. If you are among the finalists, would you object to a Board visit to your community?

\_\_\_\_ Yes \_\_\_\_ No

- If yes, please explain.



## 10. LEADERSHIP IN THE PROFESSION AND THE COMMUNITY

1. Explain and provide examples of how you would inspire trust and develop teamwork within the Rankin County School District.
2. List any publications or research you have prepared or any honors you have received that you consider relevant to the position of superintendent.
3. List any experience, service, or leadership in working with professional, civic, community, governmental, or quasi-governmental boards, authorities, or other organizations that you consider beneficial to you in the superintendent position.

## ACKNOWLEDGEMENT AND AUTHORIZATION OF APPLICANT

*I hereby certify that the information provided by me in the application is true and correct to the best of my knowledge. I understand that at some point in the selection process the information contained in the application may be made available to the general public. I understand that the facts set forth herein shall be subject to verification by the Rankin County School District.*

*I hereby authorize the Rankin County School District to conduct such background checks as it deems desirable to include, but not be limited to, inquiries to all law enforcement agencies, the Child Abuse Center Registry, Mississippi Sex Offenders Registry (or such registry of any other state), previous employers, references, credit bureaus, such other persons, businesses, or agencies deemed appropriate by the bureaus, Rankin County School District to determine my qualifications and ability for the position of Superintendent of the Rankin County School District. I further authorize the Rankin County School District to conduct the background checks described herein.*

*Should any information given by me on this application be false or incorrect, I understand, acknowledge, and agree that I may be eliminated from consideration for this position and should the same be discovered after I have been employed then I may be terminated from employment with the Rankin County School District.*

*This application will not be considered complete without a signature. Your signature certifies that, to your best knowledge and belief, the information provided herein is complete and true and that you meet the board's published criteria.*

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(Signature of Applicant)

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(Date)

***Please forward this application, along with a letter of interest, a current résumé, an official transcript from each college or university you attended, and a copy of your administrative license to:***

**Superintendent Search  
Rankin County School District  
Care of: Board Secretary, Tammie Richardson  
1220 Apple Park Place  
Brandon, MS 39042**

**Emailed application packages should be sent to: [rcsd-superintendentapp@rcsd.ms](mailto:rcsd-superintendentapp@rcsd.ms)  
Subject line "Rankin County Superintendent Search Application"**

*Emailed application package documents must be in PDF format. E-Transcripts will be accepted.*