## **Quitman County Schools Central Office** LIST AREA(S) OF EMPLOYMENT DESIRED IN **Use Only** P.O. Box 248 ORDER OF PREFERENCE Date Received: Georgetown, Georgia 39854 Elementary Administration Date Interviewed: Phone (229) 334-4189 Secondary Administration An Equal Opportunity Employer \_\_ Teaching (Primary) Pre-K-2 At:\_\_ Teaching (Elementary) 3-5 INSTRUCTIONAL APPLICATION FORM Transcripts:\_\_\_\_ \_\_ Teaching (Middle School) 6-8 Day Credentials:\_\_\_ DATE: Teaching (High School) 9-12 Certification: Area: Vocational Other Area:\_ Check One ☐ Mr. ☐ Mrs. ☐ Miss □ Dr. ☐ Ms. Name Middle Name First Name Last Name Present Address Citv ZIP Street State Social Security # \_\_\_\_ Telephone (\_\_\_\_\_) \_\_ Area Code Permanent Address \_\_ Street City ZIP State Date available for employment **CERTIFICATION INFORMATION** If you hold a valid Georgia Teaching Certificate, please complete the following. **TYPE NUMBER** DEGREE LEVEL **EXPIRATION DATE** FIELD(S) **NUMBER** DEGREE LEVEL **TYPE EXPIRATION DATE** FIELD(S) Have you ever held a Georgia Teaching Certificate? \_\_\_\_\_ Yes \_\_\_\_\_ No If you do not hold a valid Georgia Teaching Certificate, have you applied for one? \_\_\_\_\_ Yes \_\_\_\_\_ No If yes, provide date of application: Do you hold a valid teaching certificate from another state? \_\_\_\_\_ Yes \_\_\_\_\_ No Which State? \_\_\_\_\_ (Enclose Copy) Have you taken the Georgia Teaching Certification Test in your field of study? \_\_\_ Yes \_\_\_ No Praxis I \_\_\_ Yes \_\_\_ No Praxis II \_\_\_ Yes \_\_\_ No If yes, provide date \_\_\_\_\_ Did you Pass? \_\_\_ Yes \_\_\_ No (Enclose a copy of the score report.)

PERSONAL & PROFESSIONAL
List special honors won in college and/or your profession:
List clubs or professional organizations of which you are a member:
Have you taught sufficient years in any other Georgia public school system to acquire tenure under the Georgia Fair Dismissal Law?  Yes No
Are you presently under a teaching contract? Yes No System:
Date contract expires: If so, may your employer be contacted at this time for a reference? Yes No
Circle any of the following which you are qualified and willing to direct or coach:
School Newspaper, Yearbook, Band, Chorus, Debate, Decathalon, Drama, Football, Baseball, Softball, Track, Tennis, Golf, Basketball, Volleyball, Soccer, Clubs, Cheerleading Coach, Other:
AUTOBIOGRAPHY: Use this space only. No attachments please.
In your own handwriting, please write a brief autobiography, including the reason(s) you chose education as a career.
REFERENCES
Three references are required in order to give adequate consideration to your application for employment by the Quitman County Schools.

These references should be persons qualified to answer questions concerning your qualifications for the position you seek. Do not include neighbors, friends or relatives. <u>Include supervising teachers, and/or major professors, principals, assistant principals, or superintendents</u> under whom you have served.

<u>Please list the names of your reference sources</u>. It is then your responsibility to send the reference forms to these persons. A stamped, addressed envelope should be sent with each request form so that the form may be promptly returned to this office.

<u>Please thoroughly complete the top portion of the reference form.</u> You need to list the full name, address and phone number of the reference and the area of employment you seek before giving the form to the person whom you are requesting a reference.

Name	Address	Occupation	Telephone #

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Federal law prohibits discrimination on the basis of race, color, or national origin (Title VI of the Civil Rights Act of 1964); sex (Title IX of the Educational Amendments of 1972 and Title II of the Vocational Education Amendments of 1976); or handicap (Section 504 of the Rehabilitation Act of 1973) in educational programs or activities receiving federal financial assistance. Employees, students and the general public are hereby notified that Quitman County Schools do not discriminate in any educational programs or activities or in employment policies.

By filing an application for employment with the Quitman County School System, if employed, I agree to abide by all policies as set forth by the Quitman County Board of Education. I authorize full investigation of the information given in this application and consent to the representatives of the Quitman County School System contacting my references, previous and present employers, physicians, hospitals, schools attended, court officials, and law enforcement authorities and other idividuals and hereby release the Quitman County School Board from any liability for any claim or damage which may result. I understand that the Quitman County School System may investigate sources or references other than those given in this application. I acknowlege that all references will be confidential information. I understand that nothing in this employment application, in the statements or policies of the Quitman County School System or the Quitman County Board of Education, or in my communication with any System or Board official is intended to create an employment contract. No promises of employment have been made to me.

I ALSO UNDERSTAND THAT ANY MISSTATEMENT OR OMISSSION OF ANY INFORMATION REQUESTED SHALL BE A REASON FOR NON-EMPLOYMENT OR DISMISSAL FROM EMPLOYMENT. The application, transcript and other data are the property of the Quitman County Board of Education and will not be returned to the applicant. Upon recommendations for employment by the Quitman County Board of Education, I understand that I must satisfy the requirements of any testing as mandated by the state regulations.

I agree and consent for such background check and investigation to be conducted and agree to hold the school system and all officials, representatives, and employees of the foregoing harmless from all claims for libel, slander, defamation of character, invasion of privacy, intentional infliction of emotional distress, negligence, and similar claims.

HAVE	YOU I	EVER: (Each question must be answered)
YES	NO	
		Failed to have a contract renewed with a school system?
		Broken a contract with a school system?
		Been dismissed from employment with a school system or asked to resign?
		Had a teaching credential denied, revoked or suspended in any state?
		Pled guilty to or been convicted of any offense relating to the manufacture, distribution, sale or possession of any illegal drugs?
		Pled guilty or no contest to, or been convicted of any criminal offense other than a minor traffic offense?
		Received an unsatisfactory performance evaluation from an employer?
		Received a dishonorable discharge from the armed services?
		Been placed on disciplinary probation or suspended from a college or university?
		Had a driver's license suspended or revoked?
separat	te shee	WER TO ANY OF THE ABOVE QUESTIONS IS YES, you must provide a detailed explanation on a t attached to this application as to each offense including the specific offense for which you were charged, n of the offense, date, court, county, and state where you were charged.
	A	oplicant's Signature Date

In order to be considered for employment, the following must be included with the application: three completed reference forms, resumé, teaching certificate, and certification test results (i.e. Praxis).

This application will be kept on file for one year from the date of application. Notify the personnel director if you wish to remain in the active file for an additional year.