



Job Application Procedures

Job: **Certified Personnel**

Packet contents: 1. Instructions
2. Application (3 pages)
3. Reference Form (3 each)

Application process:

- 1. Obtain and complete the **Application Form**.
- 2. Obtain **Proof of Certification**:
 - a. Active Certificate that meets requirements for the position you are seeking.
- 3. Obtain **3 letters of Reference** (Forms are provided)
- 4. **Return the following to Personnel or to the Board Office Secretary**:
 - a. complete application
 - b. proof of Certification
- 5. Three references should be mailed to:

Miller County District Schools
Attention: Personnel
96 Perry Street
Colquitt, GA 39837
(229) 758-5592/758-3255 FAX
- 6. Once the application, references, and proof of Certification have been received, they are filed in the Human Resources department.
(We recommend you update your application yearly)
- 7. If a job is advertised, the application packet will be included in a review of applications. If your application is selected during the review, you will be asked to come in for an interview.
- 8. A successful interview and reference will send your application to the school board for approval.
- 9. If you are approved for hire, you will be notified and asked to obtain a **background check** and be **fingerprinted**. (Current cost is \$45.00)
NOTE: If you have fingerprints on file you will only have to obtain a background check (currently \$20.00) and return it to Personnel.

Note: Hiring is contingent upon a clear background check.

Miller County Board of Education
 96 Perry Street
 Colquitt, Georgia 39837
 Phone: (229) 758-5592; Fax: (229) 758-3255

For Office Use Only:
 Background Check
 Certificate Req Met
 Recommendations

Application for Employment for Certificated Personnel
***Referral for Interview will be made upon receipt of application and references**

PERSONAL INFORMATION (Please Print. Fill in all blanks. N/A = Not Applicable.)

Name: _____
 (First) (Middle) (Last) Social Security Number

PRESENT ADDRESS:

PERMANENT ADDRESS:

Street / P.O. Box

Street / P.O. Box

City State Zip

City State Zip

()
 Area Code / Telephone

()
 Area Code / Telephone

()
 Area Code/Cell Phone

_____ **Email Address**

POSITION FOR WHICH YOU ARE APPLYING: Check one or show preference by labeling 1, 2, & 3:

Position: Teacher Administrator Counselor Media Specialist

School: Elementary (pk-5) Middle (6-8) High (9-12) Central Office

SUBJECT AREA and/or GRADE: First Choice _____ Second Choice _____

Date Available for employment: _____

CERTIFICATION

STATE	TYPE	FIELD	CERTIFICATE NUMBER	DATE OF ISSUE	EXPIRATION DATE

Have you successfully completed student teaching? Yes No If yes, complete the following:

School Name _____ Address of School _____ Supervising Teacher _____

Have you passed the Georgia TCT/Praxis/GACE? Yes No Date Passed _____
 Please enclose a copy of your score report.

Have you met the computer competency requirements? Yes No If yes, date passed _____
 By which process did you meet the requirements? Test Certification In-Tech Training College Course Work

Total Years of Teaching Experience: _____

TEACHING EXPERIENCE (List in order of experience with most recent dates first.)

Name/Address of School System	Name & Title of Supervisor	Telephone Number	Grade(s)/Subject(s) Taught or Position held	Dates From	Dates To

Are you presently under a teaching contract? Yes No
 If Yes, date contract expires _____ School System _____

Have you ever failed to have a contract renewed? Yes (attach explanation).

Have you ever had a teaching certificate denied, revoked, or suspended in any state? Yes No (if yes, attach explanation)

Have you ever been convicted of a felony or misdemeanor other than a minor traffic violation? Yes No (if yes, attach explanation).

REFERENES

Please list 5 references below. These should be persons qualified to give information to show your fitness for the position you seek such as former principals and supervisors. Beginning teachers should include college supervisors, student teaching supervisor, and/or major professors. Do not include relatives, friends or neighbors.

Each applicant must submit 3 letters of reference. Reference forms may be located on the Miller County District Schools website (www.miller.k12.ga.us).

NAME	POSITION	HOME TELEPHONE	WORK TELEPHONE	MAILING ADDRESS

PROFESSIONAL PREPARATION:

High School _____ City/State _____ Date Graduated _____

Colleges Attended	Address	Dates	Degree/Diploma or hours of grad work	Major	Minor

MILITARY EXPERIENCE

Branch of Service	Highest Rank	From	To	Type of Discharge

By filing application for employment, if employed, I agree to abide by all policies as set forth by the Miller County Board of Education. I understand that a personal interview is required prior to employment.

I authorize full investigation of the information given in this application and consent to the representatives of the Miller County Board of Education contacting my references, previous employers, physicians, hospitals, schools attended, court officials, and law enforcement authorities.

I also understand that any misstatement or omissions of any information requested shall be reason for no employment of dismissal from employment.

The application transcripts, references, and other data are the property of the Miller County Board of Education and will not be returned to the applicant. This application will be kept in our active file for one year. It will have consideration for a second year only upon written request.

The Miller County Board of Education is an Equal Opportunity Employer and does not discriminate on the basis of race, color, sex, age, national origin, or handicap in its educational programs, activities or employment policies. **Miller County District Schools is committed to providing a quality education to its students and maintains compliance to the guidelines of highly qualified teachers established by the Georgia Department of Education.**

Applicant's Signature _____

Date _____

1. I understand that in the event I am offered a position with this school system, I will be required to be fingerprinted and have a criminal background check in accordance with the Official Code of Georgia Annotated 20-2-211 (e)(1).

I further understand that the information obtained from the criminal background check may be used in employment decisions.

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.

2. Criminal Conduct

- (A) Have you ever been convicted of any crime, entered a plea of guilty, *nolo contendere*, suffered first offender adjudication, any similar criminal, quasi-criminal determination, or adjudications, other than minor traffic violations?

_____ Yes _____ No

If the answer is "Yes", state the name and address of the court, the date of the alleged offense, a description of the charges, and an explanation of the final action taken, including any fines, probation, imprisonment, first offender adjudication, or similar disposition.

- (B) Have you ever been charged with any crime or been named in an indictment, accusation, or special presentment of any offense, other than a minor traffic violation?

_____ Yes _____ No

3. Highly Qualified Status: I understand that I must fulfill any requirements outlined by the Georgia Professional Standards Commission regarding certification **and any requirements outlined by the Georgia Department of Education for compliance with the federal guidelines of NCLB for "highly qualified" status.**

Applicant's Signature

Date

NON-CRIMINAL JUSTICE APPLICANT'S PRIVACY RIGHTS

As an applicant that is the subject of a Georgia only or a Georgia and Federal Bureau of Investigation (FBI) national fingerprint/biometric-based criminal history record check for a non-criminal justice purpose (such as an application for a job or license, immigration or naturalization, security clearance, or adoption), you have certain rights which are discussed below.

- You must be provided written notification that your fingerprints/biometrics will be used to check the criminal history records maintained by the Georgia Crime Information Center (GCIC) and the FBI, when a federal record check is so authorized.
- If your fingerprints/biometrics are used to conduct a FBI national criminal history check, you are provided a copy of the Privacy Act Statement that would normally appear on the FBI fingerprint card.
- If you have a criminal history record, the agency making a determination of your suitability for the job, license, or other benefit must provide you the opportunity to complete or challenge the accuracy of the information in the record.
- The agency must advise you of the procedures for changing, correcting, or updating your criminal history record as set forth in Title 28, Code of Federal Regulations (CFR), Section 16.34.
- If you have a Georgia or FBI criminal history record, you should be afforded a reasonable amount of time to correct or complete the record (or decline to do so) before the agency denies you the job, license or other benefit based on information in the criminal history record.
- In the event an adverse employment or licensing decision is made, you must be informed of all information pertinent to that decision to include the contents of the record and the effect the record had upon the decision. Failure to provide all such information to the person subject to the adverse decision shall be a misdemeanor [O.C.G.A. § 35-3-34(b) and §35-3-35(b)].

You have the right to expect the agency receiving the results of the criminal history record check will use it only for authorized purposes and will not retain or disseminate it in violation of state and/or federal statute, regulation or executive order, or rule, procedure or standard established by the National Crime Prevention and Privacy Compact Council.

If the employment/licensing agency policy permits, the agency may provide you with a copy of your Georgia or FBI criminal history record for review and possible challenge. If agency policy does not permit it to provide you a copy of the record, information regarding how to obtain a copy of your Georgia, FBI or other state criminal history may be obtained at the [GBI website](http://gbi.georgia.gov/obtaining-criminal-history-record-information) (<http://gbi.georgia.gov/obtaining-criminal-history-record-information>).

If you decide to challenge the accuracy or completeness of your Georgia or FBI criminal history record, you should send your challenge to the agency that contributed the questioned information. Alternatively, you may send your challenge directly to GCIC provided the disputed arrest occurred in Georgia. Instructions to dispute the accuracy of your criminal history can be obtained at the [GBI website](http://gbi.georgia.gov/obtaining-criminal-history-record-information) (<http://gbi.georgia.gov/obtaining-criminal-history-record-information>).

PRIVACY ACT STATEMENT

Authority: The FBI's acquisition, preservation, and exchange of fingerprints and associated information is generally authorized under 28 U.S.C. 534. Depending on the nature of your application, supplemental authorities include Federal statutes, State statutes pursuant to Pub. L. 92-544, Presidential Executive Orders, and federal regulations. Providing your fingerprints and associated information is voluntary; however, failure to do so may affect completion or approval of your application.

Principal Purpose: Certain determinations, such as employment, licensing, and security clearances, may be predicated on fingerprint-based background checks. Your fingerprints and associated information/biometrics may be provided to the employing, investigating, or otherwise responsible agency, and/or the FBI for the purpose of comparing your fingerprints to other fingerprints in the FBI's Next Generation Identification (NGI) system or its successor systems (including civil, criminal, and latent fingerprint repositories) or other available records of the employing, investigating, or otherwise responsible agency. The FBI may retain your fingerprints and associated information/biometrics in NGI after the completion of this application and, while retained, your fingerprints may continue to be compared against other fingerprints submitted to or retained by NGI.

Routine Uses: During the processing of this application and for as long thereafter as your fingerprints and associated information/biometrics are retained in NGI, your information may be disclosed pursuant to your consent, and may be disclosed without your consent as permitted by the Privacy Act of 1974 and all applicable Routine Uses as may be published at any time in the Federal Register, including the Routine Uses for the NGI system and the FBI's Blanket Routine Uses. Routine uses include, but are not limited to, disclosures to: employing, governmental or authorized non-governmental agencies responsible for employment, contracting, licensing, security clearances, and other suitability determinations; local, state, tribal, or federal law enforcement agencies; criminal justice agencies; and agencies responsible for national security or public safety.