



1417 Dothan Road, Bainbridge, Georgia 39817 (229) 248-2200 Fax (229) 248-2264

Certified Application

Dear Applicant,

Thank you for your interest in applying for employment with Decatur County Schools. In order for your application to be placed in our active files the following requirements must be met:

1. Your application must be filled out completely.
2. If you are certified, you must send a copy of your current Teaching Certificate and Official Transcripts.
3. If you are not yet certified, you must send a copy of your official college transcripts indicating that you have completed a teacher preparation program and that your degree has been awarded.
4. If you have graduated from a Georgia College and you are not certified, you must submit a copy of your GACE scores.
5. You must submit a photocopy of two forms of identification for our records. These can be photocopies of your driver's license and social security card.
6. You must send 3 reference forms to the people who you plan to use as references. The complete forms must be mailed back to us by your reference.

When your application package is complete, it will be placed in our active files for two years. When a vacancy occurs, our principals will look through these files to select qualified candidates who they wish to interview. IF you are selected for an interview, you will be contacted directly by the principal. All teacher applicants must be highly qualified as defined by the Elementary/Secondary Education Act (ESEA).

All current certified openings are advertised and posted in the Central Office, each Decatur County School, on the Decatur County Schools' website www.dcboe.com and on the Georgia Teacher Recruitment website www.teachgeorgia.org. You may also contact the Personnel Office @ (229) 248-2200 for information.

ALL INFORMATION PROVIDED WILL BE A PUBLIC RECORD AND WILL BE RELEASED UPON REQUEST, UNLESS EXEMPT OR CONFIDENTIAL.

Sincerely,

Department of Human Resources



Decatur County Schools

PROUD
TRADITION

THE BEARCAT WAY

PROMISING
FUTURE

This application will remain active for one year from date received unless requested to reactivate after that time.

Date: _____

Name: _____
Last Name First Name Middle (Maiden)

Permanent Address:

Present Address: If different from Permanent Address

Street, Route, or P.O. Box

Street, route, or P.O. Box

City, State, Zip

City, State, Zip

Telephone Number: _____

Cell Number: _____

Email Address: _____

Position Applying for: _____

Are you presently under contract with any school system? _____ Yes _____ No

May we contact your present employer: _____ Yes _____ No

If worked in another Georgia School System (s) what counties: _____

Have you ever worked in the Decatur County Schools System before, if so when: _____

What date would you be able to start work? _____

Do you have any limitations which would hinder you from performing in the position for which you are applying? _____yes _____ No

If yes, please explain: _____

EDUCATION

NAME OF SCHOOL & LOCATION (INCLUDE HIGH SCHOOL & ABOVE)	DEGREE, DIPLOMA, COLLEGE HOURS	MAJOR	MINOR

STUDENT TEACHING

NAME & LOCATION OF SCHOOL	DATES	NAME OF SUPERVISING TEACHER

TEACHING EXPERIENCE

I HAVE A TOTAL OF _____ YEARS OF CREDITABLE EXPERIENCE

FROM MTH/YR	TO MTH/YR	SCHOOL DISTRICT MAILING ADDRESS	GRADES/SUBJECT TAUGHT	PRINCIPAL/SUPERVISOR	REASON FOR LEAVING

OTHER WORK EXPERIENCE

FROM MTH/YR	TO MTH/YR	JOB TITLE WORK DESCRIPTION	COMPANY NAME & ADDRESS	SUPERVISOR NAME & TITLE	REASON FOR LEAVING

ACTIVE MILITARY BRANCH OF SERVICE: _____

START DATE: _____ SEPARATION DATE: _____

1. DO YOU PRESENTLY HAVE A VALID GEORGIA TEACHER CERTIFICATE? _____ YES _____ NO
2. IF YOU DO NOT HAVE A VALID GEORGIA TEACHER CERTIFICATE, HAVE YOU PASSED THE PRAXIS II SUBJECT ASSESSMENT OR GACE CONTENT ASSESSMENT IN YOUR FIELD? _____ YES _____ NO
3. HAVE YOU EVER BEEN ISSUED A TEACHIING CERTIFICATE BY ANOTHER STATE? _____ YES _____ NO
4. HAVE YOU EVER HAD A TEACHING CREDENTIAL DENIED, REVOKED OR SUSPENDED IN ANY STATE? _____ YES _____ NO

IF YES, PLEASE EXPLAIN: _____

5. HAVE YOU EVER BEEN DISMISSED OR NONRENEWED FROM EMPLOYMENT WITH A SCHOOL SYSTEM? _____ YES _____ NO

IF YES, PLEASE EXPLAIN: _____

REFERENCES

These should be persons qualified to give information to show your fitness for the position you seek.

NAME	POSITION	ADDRESS	HOME PHONE	BUISNESS

In your own handwriting, please describe any special talents, qualifications, or attributes you have which you feel will assist in arriving at a true estimate of your suitability for the position for which you are applying. Include special awards, honorary organizations, etc.

It is the policy of the Decatur County Board of Education not to discriminate on the basis of age, sex, race, religion, national origin, or handicap in its educational program, activities or employment practices.

I certify that answers given herein are true and complete to the best of my knowledge. I authorize you to make such investigations and inquires of my personal, employment, financial or medical history and other related matters as may be necessary in arriving at an employment decision. I hereby release employers, schools or person from all liability in responding to inquires in connection with my application. Furthermore, it is understood that this application becomes the property of the Decatur County School System. In the event of employment, I understand that false or misleading information given in my application or interview may result in dismissal. I understand, also, that I am required to abide by all rules and regulations of the Decatur County School System.

SIGNATURE

DATE

REFERENCE FORM

NAME OF APPLICANT: _____

NOTE TO REFERENCE: Thank you in advance for your assistance in completing this form.

1. Your relationship with the applicant.

_____ Educational Reference (college professors, deans)

_____ Experience Reference (administrators, supervising teacher, department heads)

2. Please check all work ethics that apply **directly** to your relationship with the applicant.

WORK ETHICS	EXCELLENT	GOOD	AVERAGE	FAIR	POOR
Ability to work with others/children					
Accuracy & Punctuality of Reports					
Attendance Record					
Classroom Organization & Control					
Cooperation					
Creativity					
Dependability					
Effective Use of Methods & Techniques					
Enthusiasm for Learning					
Enthusiasm for Teaching					
General Maturity					
Health					
Initiative					
Interest & enthusiasm Created in Pupils					
Knowledge of Professional Responsibility					
Knowledge of Subject Matter					
Leadership					
Personal Appearance					
Personality					
Planning & Preparation					
Poise					
Punctual in Financial Responsibilities					
Punctuality					
Scholarship					
Speech & Voice Qualities					

3. This evaluation covers the period from _____ to _____.

4. Your title during the period of evaluation of applicant. _____.

5. Would you employ this person as a teacher or re-hire if you were a former employer? _____

6. Have observed applicant teach in classroom situation? _____

7. Any special assets or limitations of this applicant? _____

8. Remarks. _____

9. College/School System _____

Address _____

Phone/e-mail _____

Signature/Present Position

Date

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