

Chattooga County Board of Education

Instructions for CERTIFIED Applicants

You must complete the following. Applications not completed in full will not be considered for employment. Please do not return your application until all documents are complete. All forms needed are enclosed.

1. Completed Application – May attach a resume
2. Three (3) Professional /Work Reference forms. Give one to each person used as a reference. Professional References could include: a former superintendent; former principal; guidance counselor from college; a mentor teacher, supervisory teacher while student teaching, etc.
3. Completed Authorization form for consent of Criminal Background check and Fingerprinting.
4. Include a copy of each: All college transcripts (originals preferred, but not required) College Diploma, Teaching Certificate, GACE or Praxis scores, or any information that may be applicable to the position for which you are applying.

This requirement may be done after an interview, but you will not be recommended for a position until confirmation is received by the Personnel Department.

5. **FINGERPRINTING – Do this ONLY if you have had a job offer.**
Bring a **\$43.25 Money Order We Cannot accept cash or personal checks**
Payable to: Chattooga County Board of Education.

You will be given a form to complete prior to going to the Sheriff's Dept. for LiveScan fingerprinting. Fingerprinting is a State Requirement and will be placed in your "Confidential" File. Prior fingerprinting and background checks through another employer cannot be accepted.

You will be notified when you are approved by the Board for employment

Once you receive approval, you must attend a scheduled orientation of policies and procedures, and to complete all employment documents and benefit forms.

~ E-Verify Employer ~

EMPLOYMENT APPLICATION FOR CERTIFIED/PROFESSIONAL POSITIONS

<h2 style="margin: 0;">CHATTOOGA COUNTY SCHOOLS</h2> <p style="margin: 5px 0;">33 MIDDLE SCHOOL ROAD Summerville, GA 30747</p> <p style="margin: 10px 0;">706-857-3447 ph. 706-857-3440 fax</p>	Office Use Only	√ Info. Received (date)
	Consent for background check / fingerprints	
	Fingerprints	
	Reference forms	
	Teaching Certificate	
	Training verification	
	Transcripts	
	Education credentials	
	Tax forms	
	Interviewed	

In order for your application to be considered the following information must be included

1. Completed application. A resume is optional, UNLESS REQUESTED it will not replace the application.
2. Three reference letters
3. Educational credentials; diploma, transcript(s)
4. Valid certifications/license (if applicable).

All applications are valid for three years; after which you must re-apply.

The application and supporting materials are the property of the Chattooga County Board of Education and will not be returned to the applicant.

Application date	Date available to begin work	
Name (print/type below)	Social Security Number (list below)	
Address (current mailing address)	City , State, Zip	
Phone number (Home)	Phone number(Cell)	
In Case of an emergency contact		
NAME	RELATIONSHIP	PHONE NUMBER(S)
1.		
2.		

Indicate position(s) for which you are applying:

- Administrative/ Supervisor – Position** _____
- Guidance Counselor** _____
- Other Position** _____

Teacher (indicate grade level) Early Childhood (P-5) Elementary Grades (P-8) Middle Grades(6-8) Secondary(9-12)

Indicate concentration _____

Do you hold a valid teaching certificate? ___ Yes ___ No

Type _____ (e.g. T-4, Early Childhood (K-4); T-5, Administration and Supervision; PBT-4 English 7-12, etc.)

List grades and fields you are best qualified to teach.

1. _____
2. _____

Extracurricular activities you are able to conduct.

1. _____
2. _____

EDUCATION (list most recent first.) LIST SCHOOLS ATTENDED AND THEIR LOCATION.	DATES ATTENDED AND/OR EXPECTED GRADUATION	DIPLOMA, DEGREE, CERTIFICATION AND/OR LICENSE RECEIVED	SUBJECT AREA
1.			
2.			
3.			

STUDENT TEACHING EXPERIENCE ⇒ (list school system info. below)		Month	Date	Year
School system	Name of school	Cooperating Teacher	College Supervisor	
1.				
2.				

ANSWER THE FOLLOWING QUESTIONS ⇒		YES	NO
1. Have you had a Professional Development Plan developed while employed in GA?			
2. Have you had the GA Teacher Evaluation Program orientation in the field in which you are applying?			
3. Do you presently hold a valid teaching certificate. If no go to question #4.			
a. State	Type	Field	Validity Period
4. Have you applied for teaching certificate?(list type, field below)⇒		YES	NO
Date applied		Type	Field
5. What teacher certification test(s) have you taken (attach copy of scores) ⇒		Test	Field
6. Are you presently under contract with any school system? (check box)⇒		YES	NO
If yes to question #6⇒	System name/location	Contract expiration date	

ALL APPLICANTS ANSWER THE FOLLOWING: I understand and agree that by answering the following questions and completing the attached Consent form for a criminal background check and fingerprinting as provided by O.C.G.A. 20-2-111 any offer / approval of employment can be terminated based on the furnishing of false or misleading information and / or the results of the background check or fingerprinting. You may explain any yes answers in the space provided below.	No	Yes/ Explain
1. Have you ever been convicted of any criminal offense?		
2. Are you willing and able to perform tasks involving moderate lifting, carrying, pulling, standing?		
3. Have you ever been arrested for any criminal offense?		

EMPLOYMENT HISTORY (list most recent first) LIST COMPANY OR INSTITUTION, ADDRESS AND PHONE NUMBER, SUPERVISOR		LIST JOB TITLE and RESPONSIBILITIES/DUTIES		DATES OF EMPLOYMENT	
1.				From	To
2.				From	To
3.				From	To
ANSWER THE FOLLOWING QUESTIONS. IF THE ANSWER IS YES, PLEASE ATTACH AN EXPLANATION>=> (check the box) YES ANSWERS YOU MAY EXPLAIN)				YES	NO
1. Have you ever failed to renew a contract with a school system?					
2. Have you ever broken a contract with a school system?					
3. Have you ever been dismissed from employment with a school system or been asked to resign?					
4. Have you ever had a teaching credential denied, revoked or suspended in any State?					
5. Have you ever received an unsatisfactory performance evaluation from an employer?					
6. Have you ever been placed on disciplinary probation or suspended from a college/university?					
7. Have you taught sufficient years in any other Georgia public school system to acquire tenure under the Georgia Fair Dismissal Law?					
If yes to question #7 =>		System(s) where tenure was acquired.		Dates employed	
REFERENCES LIST NAME, INDICATE WHETHER A PERSONAL OR PROFESSIONAL REFERENCE		ADDRESS		PHONE NUMBER(S)	
1.					
2.					
3.					

If employed, I agree to abide by all the policies set forth by the Board of Education. I authorize full investigation of the information given in this application and consent to the representative of the Chattooga County School system contacting my references, previous employers, schools attended, and law enforcement authorities. I hereby understand and certify that all statements made in this application are true and complete. I understand that misrepresentation of any of these statements shall be reason for non-employment and/or dismissal from employment. I understand all application materials are the property of Chattooga County Board of Education and will not be returned to the applicant. I further authorize the release of my GTEP files from any or all-previous employers.

Applicant's Signature

Date

SUMMARY OF GENERAL PHILOSOPHY OF EDUCATION (Hand Written)

The policy of the Chattooga County Board of Education is that no person because of race, color, religion, sex, age, physical disability or national origin be discriminated against in employment, by a program or activity administered by this agency, or in any way be excluded from participation in or the benefits of such program or activities.

employmentapplic

Chattooga County Board of Education
Attn: Personnel Coordinator
33 Middle School Rd.
Summerville, GA 30747
Phone: (706) 857-3447 Fax: (706) 857-3440

Reference Form – Certified Personnel

Applicant Name (Print)	Last four digits of Social Security Number	Date
Position(s) applying for:	Area(s) of certification (Certified applicants only)	
1.		
2.		
3.		
4.		

THE FOLLOWING INFORMATION IS TO BE COMPLETED BY REFERENCE ONLY

The above named applicant has applied for a position with the Chattooga County Board of Education. Your accurate evaluation of this applicant will assist in determining the qualifications to serve in a position with the Chattooga County Board of Education. We would appreciate you completing all applicable information and providing any comments you deem necessary to evaluate the applicant.

Reference Name/Title (Print or Type)	Reference Signature	Date
Address	Phone number(s) May we contact you by phone if necessary? <input type="checkbox"/> Yes <input type="checkbox"/> No	

Qualities To Review	Choose Not To Evaluate	Not Observed	Needs Improvement	Average	Above Average	Excellent
1. Professional Demeanor						
2. Competency in area of interest						
3. Maintains effective working Relationships with colleagues						
4. Capacity for Professional Growth						
5. Personal Habits: tact, self-control						
6. Maintains positive working Relationships						
7. Participates in community activities						
8. Attentive to details						
9. Able to work under minimal time restraints and constrictions, in fast and/or minimal paced environment						
10. Self-starter and/or team-player						
11. Classroom management and disciplinary skills						
12. Skills in effective verbal and Written communication						
13. Overall evaluation of work Experience in position applying for						
14. Overall evaluation of non-related Work experience						
15. Overall Evaluation						

Please address the following:

1. In what capacity and for how long have you known the applicant?

2. Comments not already addressed:

Chattooga County Board of Education
Attn: Personnel Coordinator
33 Middle School Rd.
Summerville, GA 30747
Phone: (706) 857-3447 Fax: (706) 857-3440

Reference Form – Certified Personnel

Applicant Name (Print)	Last four digits of Social Security Number	Date
Position(s) applying for:	Area(s) of certification (Certified applicants only)	
1.		
2.		
3.		
4.		

THE FOLLOWING INFORMATION IS TO BE COMPLETED BY REFERENCE ONLY

The above named applicant has applied for a position with the Chattooga County Board of Education. Your accurate evaluation of this applicant will assist in determining the qualifications to serve in a position with the Chattooga County Board of Education. We would appreciate you completing all applicable information and providing any comments you deem necessary to evaluate the applicant.

Reference Name/Title (Print or Type)	Reference Signature	Date
Address	Phone number(s) May we contact you by phone if necessary? <input type="checkbox"/> Yes <input type="checkbox"/> No	

Qualities To Review	Choose Not To Evaluate	Not Observed	Needs Improvement	Average	Above Average	Excellent
1. Professional Demeanor						
2. Competency in area of interest						
3. Maintains effective working Relationships with colleagues						
4. Capacity for Professional Growth						
5. Personal Habits: tact, self-control						
6. Maintains positive working Relationships						
7. Participates in community activities						
8. Attentive to details						
9. Able to work under minimal time restraints and constrictions, in fast and/or minimal paced environment						
10. Self-starter and/or team-player						
11. Classroom management and disciplinary skills						
12. Skills in effective verbal and Written communication						
13. Overall evaluation of work Experience in position applying for						
14. Overall evaluation of non-related Work experience						
15. Overall Evaluation						

Please address the following:

1. In what capacity and for how long have you known the applicant?
2. Comments not already addressed:

Chattooga County Board of Education
Attn: Personnel Coordinator
33 Middle School Rd.
Summerville, GA 30747
Phone: (706) 857-3447 Fax: (706) 857-3440

Reference Form – Certified Personnel

Applicant Name (Print)	Last four digits of Social Security Number	Date
Position(s) applying for:	Area(s) of certification (Certified applicants only)	
1.		
2.		
3.		
4.		

THE FOLLOWING INFORMATION IS TO BE COMPLETED BY REFERENCE ONLY

The above named applicant has applied for a position with the Chattooga County Board of Education. Your accurate evaluation of this applicant will assist in determining the qualifications to serve in a position with the Chattooga County Board of Education. We would appreciate you completing all applicable information and providing any comments you deem necessary to evaluate the applicant.

Reference Name/Title (Print or Type)	Reference Signature	Date
Address	Phone number(s) May we contact you by phone if necessary? <input type="checkbox"/> Yes <input type="checkbox"/> No	

Qualities To Review	Choose Not To Evaluate	Not Observed	Needs Improvement	Average	Above Average	Excellent
1. Professional Demeanor						
2. Competency in area of interest						
3. Maintains effective working Relationships with colleagues						
4. Capacity for Professional Growth						
5. Personal Habits: tact, self-control						
6. Maintains positive working Relationships						
7. Participates in community activities						
8. Attentive to details						
9. Able to work under minimal time restraints and constrictions, in fast and/or minimal paced environment						
10. Self-starter and/or team-player						
11. Classroom management and disciplinary skills						
12. Skills in effective verbal and Written communication						
13. Overall evaluation of work Experience in position applying for						
14. Overall evaluation of non-related Work experience						
15. Overall Evaluation						

Please address the following:

1. In what capacity and for how long have you known the applicant?

2. Comments not already addressed:

Chattooga County Board of Education
Statement of Authorization and Consent Form
Certified / Classified Positions

I understand that as an employee of the Chattooga County Board of Education, I will be required to be fingerprinted and have a criminal background check in accordance with the requirements outlined by either policy of the Board of Education or the Professional Standards Commission for re-certification. I agree and consent for such background check and investigation to be conducted and agree to hold harmless the school system and all officials, representatives, and employees of the foregoing from any and all claims which may arise from the school districts' use of information obtained from the criminal background check.

I further understand that effective 1/1/95, if I am offered a position that requires a Commercial Driver's License (CDL) that I will be subject both initially and randomly to alcohol and drug screening in accordance with O.C.G.A. 20-2-1120 through 20-2-1122.

I hereby authorize the Chattooga County Board of Education to receive any criminal background history pertaining to me which may be in the files of any local state, or federal agency.

I further authorize the Chattooga County Board of Education Personnel Department to periodically run additional criminal history record inquiries without seeking an additional consent.

A photocopy or facsimile of this release authorization will be as valid as the original, even though the photocopy does not contain my original signature.

Full Name (Print or Type)

Address

City State Zip

Sex Race Date/Birth Social Security Number

Applicant Signature Date

Notary Signature Date