

Johnson County Board of Education
P.O. Box 110
Wrightsville, Georgia 31096
(478) 864-3302

Date of Application _____ Date Available for Employment _____

GENERAL INFORMATION

Dear Applicant:

1. In order for us to consider your application for employment, we must have all information requested.
2. PRINT or type all information EXCEPT hand-written autobiography.
3. Copies of transcripts may be submitted with the initial application however, official transcripts are REQUIRED prior to signing a contract for employment.
4. You **MUST** sign application (see last page).
5. When completed send your application package to the Superintendent of Schools at the above address.

Last Name	First	Middle
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Present Address _____

Street	City	State	Zip Code	Phone
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Permanent Address _____

Street	City	State	Zip Code	Phone
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Social Security Number _____

Are you legally eligible for employment in the U.S.A.? YES NO

POSITION DESIRED

Indicate grades/subjects/positions for which you are certified and/or desire employment:

- | | |
|---|---|
| Elementary Grades: <input type="checkbox"/> | Counselor (Grades): <input type="checkbox"/> |
| Middle Grades: <input type="checkbox"/> | Media Specialist (Grades): <input type="checkbox"/> |
| Secondary Grades: <input type="checkbox"/> | Administrator: <input type="checkbox"/> |
| Special Education Areas: <input type="checkbox"/> | Other: <input type="checkbox"/> |

***Official transcripts are required if you are offered employment with the Johnson County School System**

I. Education Experience

Report in chronological order, beginning with the most recent position, all full-time teaching and administrative experience including teaching in accredited colleges. Report work as substitute teacher under "Other Work Experience." Continuous experience in one school should be reported on one line. (If a teacher teaches 120 or more contract days during a school year, credit for a year of experience is given. Use separate sheet if necessary.)

School Name	System Name	Complete Address (include zip code)	Dates From/To	Teaching/ Job Assignment	Supervisor

Military:

Branch of Service: _____ Dates From/To: _____ Highest Rank: _____ Type of Discharge: _____

Other Work Experience:

Employer	Job Title	Address	Dates From/To	Supervisor

II. Professional Preparation:

Name of School	City/State	Dates From/To	Credit or Degree	Major Subject	Minor Subject
High School:					
*Colleges:					

Student Teaching:

Have you completed student teaching? Yes No If yes: _____

Name and Address of School	Dates From/To	Subject to Grade Level	Name of Supervising Teacher

If student teaching has occurred within the last 3 years, provide mailing address or phone number of supervising teacher.

III. Certification

1. Do you presently hold a valid Georgia teaching certificate? Yes* No

Type	Field	Expires	Certificate No.	Retirement No.

*Copies of Georgia certificates are required if you are offered employment with the Johnson County School System.

2. If no, have you applied for a Georgia certificate? Yes No If yes: _____

Date applied: _____

Field: _____

3. Have you previously held a _____ Probationary and/or _____ Provisional Georgia certificate? If yes, provide date of expiration, field and system name where employed when certificate(s) was held:

4. Do you presently hold or have you ever held a teaching certificate from another state?

Yes No

Type	Field	Expires	Certificate No.

*Copies of out-of-state certificates are required if you are offered employment with the Johnson County School System.

5. Have you taken the GACE Test? Yes No If yes, field/teaching area in which you took test:

Passed: Yes No If you have taken the TCT or Praxis II test, enclose copy of score report.

6. Have you ever had a Professional Development Plan (PDP) developed for you while employed in a Georgia system? Yes No If yes, name of system: _____

(Enclose Copy)

7. Contact the following state office regarding questions about teaching certification in Georgia: Professional Standards Commission Certification Division, 1452 Twin Towers East, Atlanta, GA 30334-5070. Phone: (404) 657-9000 or (800) 869-7775 in Georgia only.

Request for application, evaluations and renewals may be made 24 hours a day at (404) 657-1313
PSC Website: www.gapsc.com E-Mail: Mail@gapsc.com

IV. Personal and Professional Data:

1. State reason for leaving your last teaching or administrative position: _____

2. Have you taught sufficient years in any other Georgia public school system so as to acquire "tenure" under the Georgia Fair Dismissal Law? Yes No If yes, list the name(s) of the school system(s) and dates of employment.

3. Are you presently under contract with any other school system? Yes No If yes, name system location and date contract expires. _____

4. List any special honors or distinctions you received in college or in your profession: _____

5. List professional clubs or organizations of which you are a member. _____

6. List any special interests or hobbies. _____

7. Circle any of the following for which you are qualified and willing to coach.

School Newspaper, Yearbook, Chorus, Debate, Drama, Football, Baseball, Track, Tennis, Golf, Swimming,

Basketball, Volleyball, Soccer, Clubs, Cheerleading Sponsor, Other: _____

HAVE YOU 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 other 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?

IF THE ANSWER TO ANY OF THE ABOVE QUESTIONS IS YES, YOU MUST PROVIDE A DETAILED EXPLANATION ON A SEPARATE SHEET ATTACHED TO THIS APPLICATION TO EACH OFFENSE INCLUDING THE SPECIFIC OFFENSE FOR WHICH YOU WERE CHARGED, THE DISPOSITION OF THE OFFENSE, AND THE DATE, COUNTY, AND STATE WHERE YOU WERE CHARGED.

V. References

Do you have a placement file? Yes No You must request that your placement file be forwarded to this office if you are a beginning teacher.*

Persons listed as references should be qualified to answer questions concerning the position you seek. Include principals and supervisors under whom you have taught. (If you are a beginning teacher, include cooperating teacher, college supervisor, and/or major professors.) Do not include neighbors, friends or relatives.

*PLEASE INCLUDE REFERENCES EVEN IF YOU HAVE A PLACEMENT FILE, COMPLETE ADDRESSES ARE REQUIRED INCLUDING ZIP CODES. PLEASE PRINT OR TYPE REFERENCES – WE MAIL REFERENCE FORMS.

Name	Professional Address of Reference		
Position	School or location	Area Code	Telephone
	Street	City	State Zip Code
Name	Professional Address of Reference		
Position	School or location	Area Code	Telephone
	Street	City	State Zip Code
Name	Professional Address of Reference		
Position	School or location	Area Code	Telephone
	Street	City	State Zip Code

VI. Autobiography:

In your own handwriting, please write a brief autobiography, including the reason(s) you chose education as a career. (Use separate sheet if necessary)

CONSENT FOR FINGERPRINTING AND CRIMINAL BACKGROUND CHECK

I understand that in the event I am offered a position with this school system that requires certification by the Professional Standards Commission, I will be required to be fingerprinted and have a criminal background check in accordance with 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.

I understand that, if offered employment by the Johnson County Board of Education, I am responsible for paying the fee for the background check.

I understand I will be issued only a temporary contract of employment pending the outcome of a criminal record check at the current cost of forty dollars.

The furnishing of false or misleading information or the intentional withholding of material facts, including facts concerning one's criminal record will constitute grounds for immediate termination.

I consent for any former employer of mine to furnish any information from my personnel file or evaluations relative to my performance as an employee, and I waive any right I may have for such information to remain confidential.

By filing application for employment with the Johnson County School System, if employed, I agree to abide by all the policies as set forth by the Johnson County Board of Education. I authorize investigation of the information given in this application and to the representatives of the Johnson County School System contacting my references, previous employers, schools attended, court officials, and law enforcement authorities. I also understand that any misstatement or omission of any information requested shall be a reason for non-employment or dismissal from employment.

The application, transcript, references and other data are the property of the Johnson County Board of Education and will not be returned to the applicant.

**APPLICANT'S
SIGNATURE** _____

Date _____

As required by Title VI of the Civil Rights Act of 1964, Section 504 of the Rehabilitation Act of 1973, Title II of the Americans with Disabilities Act, Title IX of the Education Amendments of 1972, the Age Discrimination Act of 1975, the Americans with Disabilities Act of 1990 and the U.S. Department of Agriculture policy, this institution is prohibited from discriminating on the basis of race, color, national origin, sex, age, or disability in admission to its programs, services, or activities, in access to them, in treatment of individuals, or in any aspect of their operations. For additional information or referral to the appropriate system coordinator, contact the system superintendent's office at 150 Lee St, Wrightsville, GA 31096, (478) 864-3302

APPLICATION PROCEDURES

APPLICATION FORM

1. Any person may request and receive an application, regardless of existing vacancies or number of applications on file in the personnel office.
2. ALL information requested on the application form must be provided, including complete address for you and your references, or the application will not be processed. Please do not write: "See Resume" on the reference portion of the application.
3. FIRST YEAR TEACHERS: If your college has a placement file, you must request that a copy be sent to our personnel office after you have submitted your application. We cannot request this document for you.
4. EXPERIENCED TEACHERS: Your references must include your current and most recent direct supervisor/evaluator.
5. Copies of transcripts may be submitted with the application: however, if an offer of employment is made to you, you must submit OFFICIAL UNDERGRADUATE AND GRADUATE TRANSCRIPTS FROM ALL COLLEGES YOU HAVE ATTENDED.
6. Submit copies of teaching certificates you hold from any state. You may be asked to produce the original documents if you employ in our system.
7. Provide a copy of your score report if you have taken the appropriate PRAXIS II test.
8. You may submit any information to support your application, such as: resume, recognition certificates, media clippings, etc.; however, submit only copies, as these items cannot be returned to you.
9. Applications remain in our active file **ONE YEAR FROM THE DATE OF RECEIPT** unless you request that we no longer consider you for employment.
10. Please notify our personnel office if you accept other employment and are no longer interested in employment in the Johnson County Schools.

INTERVIEWS

Due to the large number of applications we receive, we cannot interview all candidates; therefore, we carefully screen all completed applications and select candidates to interview. Your application and qualifications will be carefully considered and reviewed in light of our needs.

1. Interviews for jobs beginning in late August or September for the new school year usually begin in March and continue until all positions are filled; however, when an unexpected or anticipated vacancy occurs, all completed applications are screened and selected candidates are requested to come for an interview.
2. Please **do not** contact the principal and request an interview.

EMPLOYMENT

1. Georgia Code Section 20-2-211 requires that an individual be fingerprinted before a temporary contract of employment is issued. Employment is temporary pending the results of a criminal background check.
2. No offer of employment is finalized until approval has been voted upon by the Johnson County Board of Education.