

METROPOLITAN REGIONAL EDUCATIONAL SERVICE AGENCY

Metro RESA
 1870 Teasley Drive, S.E.
 Smyrna, Georgia 30080
 (770) 432-2404

North Metro Program
 601 Beckwith Street
 Atlanta, Georgia 30314
 (404) 802-6070

PROFESSIONAL EMPLOYMENT APPLICATION

GENERAL INFORMATION

1. In order for us to consider your application for employment, we must have all information requested.
2. This application is required for all certified and administrative positions.
3. PRINT all information EXCEPT handwritten Section V.
4. You must enclose a copy of your most recent annual evaluation if you are an experienced teacher.
5. You must sign the application on the last page (Section IX).
6. Georgia Law requires fingerprinting of newly employed certified personnel.
7. The enclosed letter should be reviewed as you complete this application.
8. If you are applying for a non-teaching position, you may omit Sections IV and VII.

SOCIAL SECURITY NUMBER _____ DATE _____

Last Name First Middle Maiden

PRESENT ADDRESS _____ (_____) _____
Street City State Zip Code Phone

PERMANENT ADDRESS _____ (_____) _____
Street City State Zip Code Phone

WORK PHONE: () _____ DATE AVAILABLE FOR EMPLOYMENT _____

ARE YOU LEGALLY AUTHORIZED TO WORK IN THE STATE OF GEORGIA AND/OR UNITED STATES OF AMERICA? _____

SECTION I

In column 1 below, indicate the position(s) for which you are applying in order of preference. In the second column, indicate the subject(s), grade level(s) or department preferred.					
Position(s) Desired (Example: Teacher, Principal, Guidance)	Office Use Only	Level (s)	Subject	Department	Office Use Only
1.					
2.					
3.					
4.					

It is the policy of Metropolitan Regional Educational Service Agency (Metro RESA) not to discriminate on the basis of age, sex, race, color, religion, national origin or other legally-protected status in its educational programs, activities, or employment practices.

SECTION II- EMPLOYMENT RECORD

LIST ALL PREVIOUS EXPERIENCE, BEGINNING WITH MOST RECENT. Include current educational and non-educational work experience. A resumé cannot substitute for this information.

Dates	Grade/Subject or Position	Name and Complete Address of Employer- Including Zip Codes and Telephone Numbers	Reason for Leaving

If applicable please list total years of experience: _____ (Must complete 120 contract days in a regionally accredited institution to be given credit for one year of experience.)

Military Service:

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

SECTION III- EDUCATIONAL/PROFESSIONAL PREPARATION- List every college attended.

Name of Institution	Dates From/To	Degree Earned	Major	Minor

UNDERGRADUATE G.P.A. _____

SECTION IV- STUDENT TEACHING

Will you complete or have you completed student teaching? YES NO N/A

If you have completed student teaching within the last five years, please provide the following information:

- _____

Name of school where you taught _____ dates from _____ until _____ Name of college supervisor _____

Address of school where you student taught _____ subject _____ grade level _____ Name of cooperating teacher _____
 School Phone () _____ Home Phone () _____
- _____

Name of school where you taught _____ dates from _____ until _____ Name of college supervisor _____

Address of school where you student taught _____ subject _____ grade level _____ Name of cooperating teacher _____
 School Phone () _____ Home Phone () _____

SECTION V- PROFESSIONAL EXPERIENCE

Describe professional experiences that you feel have significantly contributed to your preparation for the position you seek. Complete this in your own handwriting.

SECTION VI- PERSONAL & PROFESSIONAL INFORMATION

Are you currently under contract with another school district? Yes No **If yes, name of district:** _____

HAVE YOU EVER: (Each question must be answered)

YES NO

- Failed to have a contract renewed with a school system?
- Been dismissed from employment with a school system or asked to resign?
- Broken a contract with a school system or been released from contract in lieu of non-renewal?
- Had a teaching credential denied, revoked, or suspended in any state?
- Received an unsatisfactory performance evaluation from an employer?
- Been placed on disciplinary probation or been suspended from a college or university?
- Arrested, pled guilty to, or been convicted of any offense relating to the manufacture, distribution, sale or possession of any illegal drugs?
- Arrested, plead guilty or no contest to, or been convicted of any criminal offense other than a minor traffic offense?
- Received a dishonorable discharge from the armed services?

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 as to each offense including the specific offense for which you were arrested or charges, the disposition of the offense, and the date, court, county, state, or country where you were charged.

CONSENT FOR FINGERPRINTING AND CRIMINAL BACKGROUND CHECK

I understand that in the event I am offered a position with Metro RESA 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 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 MRESA and all officials, representatives, and employees of the forgoing harmless from all claims for libel, slander, defamation of character, invasion of privacy, intentional infliction of emotional distress, negligence, and similar claims.

The furnishings of false or misleading information or the intentional withholding of material facts concerning one’s criminal record will constitute grounds for immediate termination. I consent for any former employer 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.

I authorize full investigation of the information given in this application and consent to the representatives of Metro RESA 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 Metro RESA and will not be returned to the applicant.

Applicant’s Signature _____ Date _____

SECTION VII- CERTIFICATION INFORMATION

Please enclose copies of all certificates held.

YES NO

- 1. Do you presently hold a valid Georgia teaching certificate? If yes, Subject/Grade(s) _____ Expiration _____
- 2. Have you held a Georgia certificate that is now expired?
- 3. Have you passed the Georgia Teacher Certification test? Date ____/____/____ Field _____
- 4. Have you held a probationary (PAT) or Provisional (BT) Georgia Certificate?
- 5. Do you hold a valid certificate from another state? State _____ Expiration Year _____
Field _____

SECTION VIII- REFERENCES

You **must** list the most recent principal or supervisor under whom you have worked beginning with your most recent experience. Beginning teachers must include cooperating teacher, college supervisor, and/or major professors. **Do not include neighbors, friends, or relatives. Complete addresses including zip codes, and telephone numbers are required. Print or type reference information.**

1) _____ (_____) _____
 Name Title Telephone

Address City State Zip

2) _____ (_____) _____
 Name Title Telephone

Address City State Zip

3) _____ (_____) _____
 Name Title Telephone

Address City State Zip

4) _____ (_____) _____
 Name Title Telephone

Address City State Zip

SECTION IX- APPLICANT’S AUTHORIZATION STATEMENT

READ AND SIGN THE FOLLOWING STATEMENT AFTER COMPLETING THE APPLICATION.

By filing application for employment with Metro RESA I agree, if employed, to abide by all the policies set forth by Metro RESA. I understand that Metro RESA may investigate sources or references other than those given in this application. I acknowledge that all references will be confidential information. I understand that nothing in this employment application is intended to create an employment contract. No promises of employment have been made to me.

APPLICANT’S SIGNATURE _____ DATE _____

Please allow eight weeks for processing this application.