

Coweta County School System

Department of Human Resources
P.O. Box 280
Newnan, Georgia 30264
Phone (770) 254-2803 or 254-2804
FAX (770) 254-2757

Application for Teacher/Administrator

Section I - Position Desired

ELEMENTARY TEACHER (PreK-5)

Specify Level

- ☐ Pre-K
☐ Primary K-3
☐ Intermediate 4-5

MIDDLE SCHOOL TEACHER (6-8)

Specify Subjects and Level

SECONDARY TEACHER (9-12)

Specify Subjects and Level

EXTRACURRICULAR ACTIVITIES YOU ARE QUALIFIED TO SPONSOR:

SPECIAL EDUCATION

Specify areas of Special Education

ADMINISTRATOR

Specify Level

- ☐ Elementary
☐ Middle
☐ High
☐ Central Office

OTHER

Please allow three weeks for processing this application prior to contacting our office.

OFFICIAL USE ONLY

Date Received: _____

- | | |
|--|--|
| <input type="checkbox"/> Initial Interview | <input type="checkbox"/> Certification |
| <input type="checkbox"/> References | <input type="checkbox"/> Placement File |
| <input type="checkbox"/> Narrative | <input type="checkbox"/> All Transcripts |
| <input type="checkbox"/> Application Complete (placed in screening file) | |

General Information

Name: _____
Last First Middle

Social Security No: _____

Present Address: _____
Street City State Zip Code

Telephone: () _____

Parent's/Permanent Address: _____
Street City State Zip Code

Telephone: () _____

Date: _____

Business Telephone: () _____

Section II - Educational Training

A transcript from all colleges attended is required to complete application.

[illegible]

Approximate undergraduate G.P.A. _____

Approximate graduate G.P.A. _____

Section III - Student Teaching Information

Name of Supervising Teacher: _____ Home Telephone: _____

Address: _____

Street	City	State	Zip
--------	------	-------	-----

Name of Supervising Principal:_____ Home Telephone:_____

Address: _____
Street City State Zip

Name of School:_____ Grade/Subject:_____ Telephone: _____

School Address: _____

Street	City	State	Zip

Dates of Student Teaching: _____

Section IV - Employment Record

Beginning with current position, list all educational and non-educational work experience.

[illegible]

Total Years of Teaching Experience (Must complete 120 contract days to be given credit for one year of experience):

Please attach a copy of GTEP evaluations for last year including annual summary evaluation, any GTDRI forms and all GTOIs.

Section V - Military Experience

Branch of Service: _____ Induction Date: _____ Separation Date: _____
Highest Rank: _____ Type of Discharge: _____
Provide copy of military discharge form.

Section VI - Certification Information

Do you presently hold a valid teaching certificate? _____ Field(s): _____ State _____
Validity Period: _____ to _____ Hours earned toward renewal: _____
Have you applied for a Georgia teaching certificate? _____ Yes _____ No Date applied: _____
Have you taken the Georgia PRAXIS? _____ Yes _____ No (Enclose a copy of score report.)
Have you previously held a probationary (PA) Georgia teaching certificate? _____ Yes _____ No
Have you previously held a provisional (B) Georgia teaching certificate? _____ Yes _____ No
Have you ever had a teaching certificate denied, revoked, or suspended in any state? _____ Yes _____ No
If yes, explain _____

Section VII - Other Information

List any organizations of which you are/have been a member and offices held: (You may exclude memberships which would reveal sex, race, religion, national origin, age, ancestry, disability or other protected status.)

Have you ever been dismissed/non-renewed from employment with a school system? _____ Yes _____ No
If yes, explain: _____

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

Do you have any relatives employed by the Coweta County School System? _____ Yes _____ No

Who: _____ Relationship to you: _____

Where: _____

Have you ever been convicted by federal, state or other law enforcement authorities or pleaded nolo contendere for violation of any federal law, state law, county or municipal law, regulation or ordinance? (Do not include anything that occurred before your seventeenth birthday. Do not include minor traffic violations for which a fine of \$100 or less was imposed.) _____ Yes _____ No

Violation	Date	Court, State, County Where Charged	Disposition

Section VIII - References

Will a placement file be a part of this application? ___ Yes ___ No If so, please forward to this office. Indicate if submitted under a different name: _____

Persons listed as references should be able to answer questions concerning the applicant's qualifications for the position sought. The most recent supervising principals and/or central office administrators who have direct knowledge of the applicant's work must be included. Beginning teachers must include cooperating teacher, college supervisor, and/or major professors. Neighbors, friends, or relatives should not be included.

Please list references (even those in a placement file). Complete addresses are required, including zip codes. Please print or type.

1.	Name	Title	Telephone:	School	Home
	Street	City	State	Zip	
2.	Name	Title	Telephone:	School	Home
	Street	City	State	Zip	
3.	Name	Title	Telephone:	School	Home
	Street	City	State	Zip	

Section IX - Signature Statement

Read this statement and sign after completing the application.

By filing an application for employment with the Coweta County School System, if employed, I agree to abide by all the policies as set forth by the Coweta County Board of Education. I authorize full investigation of the information given in this application and consent to the representatives of the Coweta 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 immediate dismissal from employment.

I understand and agree to a criminal record check as provided by O.C.G.A. § 20-2-211, the policies and rules of the State Board of Education and of this board of education. I agree to be fingerprinted by the appropriate law enforcement officials and I further agree to sign the appropriate forms which the law enforcement agency may require me to sign consenting to a criminal record check through the National Crime Information Center and the Georgia Crime Information Center. I understand that I will be issued only a temporary contract of employment pending the outcome of a criminal record check.

The application, transcript, references and other data are the property of the Coweta County Board of Education and will not be returned to the applicant. They will be kept on file through two hiring cycles.

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.

APPLICANT'S SIGNATURE _____ SS # _____ DATE _____

The Coweta County Board of Education is an equal opportunity employer and does not discriminate in employment on the basis of race, color, sex, religion, creed, national origin, age, or disability.

Non-Discrimination Compliance Coordinator: Winston Dowdell, Associate Superintendent
Coweta County Schools
P.O. Box 280
Newnan, GA 30264
(770) 254-2802

This Section Must be Completed in Applicant's Handwriting

Please describe in narrative form additional information applicable to the position for which you are applying, **including but not limited to**, particular skills and experiences, why you chose a career in education, membership in honor societies, awards, fellowships and publications, jobs held, military experience, hobbies and special interests. Please use the back of this sheet if necessary.

Signature

Social Security Number

Date