

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 Classified Personnel

## Section I - Position Desired

**CLERICAL**

- ☐ Secretary  
☐ Bookkeeper  
☐ Clerk

## FOOD SERVICE

- \_\_\_\_\_ Cook  
 \_\_\_\_\_ Utility  
 \_\_\_\_\_ Cashier

## PARAPROFESSIONAL

- ☐ Regular Classroom  
☐ Special Education  
☐ Media

## TRANSPORTATION

- \_\_\_\_ Bus Driver  
 \_\_\_\_ Bus Monitor

## TECHNOLOGY

- ☐ Tech Assistant  
☐ Tech Specialist

## ADMINISTRATOR

- \_\_\_ Business Service
- \_\_\_ Technology
- \_\_\_ Transportation
- \_\_\_ Food Service

## AFTER SCHOOL PROGRAM

- \_\_\_\_ Site Coordinator  
\_\_\_\_ Worker

## OTHER

**All applicants must complete this application form. The accuracy and completeness with which this form is filled out will be factors in the consideration of your application.**

**Please answer each item. If not applicable, write NA.**

**This application will be retained in our active files for one (1) year. In order to maintain this application in an active status after one (1) year, your request must be in writing.**

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

**OFFICIAL USE ONLY**

Date Received: \_\_\_\_\_

- |   |   |
|---|---|
| <input type="checkbox"/> References         | <input type="checkbox"/> Release Statement    |
| <input type="checkbox"/> Proof of Education | <input type="checkbox"/> Application Complete |

## General Information

Name: \_\_\_\_\_ Social Security No: \_\_\_\_\_

Last

First

Middle

Social Security No.:

Present Address: \_\_\_\_\_  
Telephone: (        ) \_\_\_\_\_

City

State

Zip Code

Telephone: \_\_\_\_\_ ( ) \_\_\_\_\_

Parent's/Permanent

City

State

Zip Code

Telephone: \_\_\_\_\_ ( ) \_\_\_\_\_

Date: \_\_\_\_\_ Business Telephone: (      ) \_\_\_\_\_

Business Telephone:

## Section II - Educational Training

A copy of your highest degree of education is required to complete application.

Dates	Name of School (high school, vocational, college, and graduate school)	Degree	Major	Minor

## Section III - Other Training

Indicate any foreign languages you can speak, read and/or write: \_\_\_\_\_

Are you able to communicate with sign language? \_\_\_\_\_ What musical instruments do you play? \_\_\_\_\_

What training or experience have you had which would qualify you for a food service position? \_\_\_\_\_

Describe any specialized training, apprenticeship, skills and extracurricular activities that you feel have significantly contributed to your preparation for the position you seek. \_\_\_\_\_

## Section IV - Employment Record

Beginning with current position, list the last ten (10) years of experience.

Dates	Position	Name and Address of Employer	Reason for Leaving

Describe your working experience (or other experiences ) that you feel have contributed to your preparation for the position you seek. \_\_\_\_\_

## Section V - Military Experience

Branch of Service: \_\_\_\_\_ Induction Date: \_\_\_\_\_ Separation Date: \_\_\_\_\_

Highest Rank: \_\_\_\_\_ Type of Discharge: \_\_\_\_\_

**Provide copy of military discharge form (DE 214).**

## Section VI - Specialized Skills

Do you presently hold a valid teaching certificate? \_\_\_\_\_ Field(s): \_\_\_\_\_ State \_\_\_\_\_

Validity Period: \_\_\_\_\_ to \_\_\_\_\_

Do you presently hold a Georgia auxiliary license? \_\_\_\_\_ Validity Period: \_\_\_\_\_ to \_\_\_\_\_

Type of driving license now held \_\_\_\_\_ License No. \_\_\_\_\_ Expiration Date: \_\_\_\_\_

Years of driving experience: Car \_\_\_\_\_ Truck \_\_\_\_\_ Bus \_\_\_\_\_

If you are applying for a school bus driver position, are you willing to attend a driver training course? \_\_\_\_\_

Circle if proficient: Typing Bookkeeping Calculator Copy Equipment PC Other (list) \_\_\_\_\_

Do you consider yourself computer literate? \_\_\_\_\_ Which tools are you proficient in (e.g., Internet, spreadsheet, data base, word processing, desktop publishing)? \_\_\_\_\_

## Section VII - Personal and Professional Information

Are you presently employed with any school system? \_\_\_\_\_ Name of system: \_\_\_\_\_

Have you ever been dismissed from employment? \_\_\_\_\_ Yes \_\_\_\_\_ No If yes, explain:

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

The reference forms included with your application should be given or mailed to your listed references. All references must be mailed directly to the Department of Human Resources and will be considered confidential information.

Persons listed as references should be able to answer questions concerning the applicant's qualifications for the position sought. The most recent or former employer(s), supervisor(s), and other appropriate persons who have direct knowledge of the applicant's work must be included. Neighbors, friends, or relatives should not be included.

Please list references. Complete addresses are required, including zip codes.

**Please print or type.**

1.	Name	Title	Telephone:	Business	Home
	Street	City	State	Zip	
2.	Name	Title	Telephone:	Business	Home
	Street	City	State	Zip	
3.	Name	Title	Telephone:	Business	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 pertaining to me which may be in the files of any state or local criminal justice agency in Georgia.

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 for one (1) year.

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**

## To Be Completed by Administrative, Clerical, and Paraprofessional Applicants

**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, awards, jobs held, military experience, travel, hobbies and special interests. Please use the back of this sheet if necessary.

Signature

Social Security Number

Date