

Long County Schools

Mr. David Edwards, Superintendent P. O. Box 428 Ludowici, Georgia 31316 Telephone: (912) 545-2367 Fax: (912) 545-2380 Board Members Florence Baggs Julie Dawson Dennis DeLoach, Vice-Chair Linda DeLoach Carolyn Williamson, Ed.D, Chair

The mission of the Long County School System is to ensure a quality education for all students by providing an effective learning environment where students have the opportunity to be challenged and academically successful.

Dear Applicant:

Thank you for your interest in the Long County School System. We are delighted that you are considering our school system. We believe you will find Long County to be a wonderful place to live, work, and educate children.

In order for your application to process in a timely manner, it is essential that you follow these guidelines:

Complete **all of the areas** on the application. The following information must be submitted before your application will be considered complete:

- Official transcripts of course work at all colleges and universities (diploma not sufficient).
- A brief personal resume outlining your educational preparation and previous work experience is recommended but cannot be accepted in lieu of completing any section on this application.
- Copy of current Georgia and/or other teaching certificates or documentation showing eligibility for a Georgia certificate.
- Copy of applicable GACE test results if requested.

Your application will be kept on file for one year. You must provide name, address, and/or telephone number changes **in writing** to our office. Current contact information is extremely important so we can reach you for an interview.

Your application file will be made available to principals; therefore, it is not necessary for you to call or visit schools. Principals will select and contact applicants of their choice. You may call the Long County Board of Education Central Office to check the status of your application file at (912) 545-2367.

If you have any questions regarding the application procedures, please do not hesitate to call.

Sincerely,

J. David Edwards Superintendent

LONG COUNTY SCHOOL SYSTEM

CERTIFIED STAFF APPLICATION FOR EMPLOYMENT

For Office Use Only:

- _____ Transcripts
- _____ Application Complete
- _____ Background Clear
- _____ Fingerprint Complete
- _____ BOE Approved:
- I-9 Complete Clearance Certificate
- DIRECTIONS

Thank you for your interest in the Long County School System. All prospective employees must have an application on file in the Central Office. Applications must be complete before an applicant will be considered for employment.

The following information must be submitted before an application will be considered complete:

- 1. Transcript(s) of course work from all colleges and universities attended.
- 2. Copies of current teaching certificates and Georgia Teacher Certificate Test (TCT), GACE, or Praxis II scores, if requested.

Once activated, applications will remain on file for one year. It is the responsibility of the applicant to notify the Long County Board of Education for the application to remain active for a longer period of time and to update the information in the application file. All communication should be addressed to: Personnel Office, Long County Board of Education, P.O. Box 428, Ludowici, Georgia 31316. You may call (912) 545-2367 if you have questions or to check the status of the application to insure that all requested information has been received.

When position vacancies occur, the position will be advertised and interviews will be scheduled from the applications on file. Applications are accepted on an ongoing basis.

	PERSONAL			
Full Name:Last	First		Middle	
Preferred Name:		Security Number:		
E-Mail Address:				
Address: Stre	et # or PO Box or Apt. #	City	State	Zip Code
Phone Number: Home ()	Work ()	Cell ()	
	POSITION			
List all positions for which you wish to	apply and are qualified, in order of pre	eference.		
Position 1	Position 3			
Position 2	Position 4			
List the grade level(s), subject area(s)	, or school preference, if applicable:			
Date Available for Employment:				

THE LONG 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.

PROFESSIONAL CERTIFICATION

Do you currently	/ hold an active Georgia	Professional Educator Certificate?	Yes	No	
If not,	If not, have you applied for a certificate/Certificate of Eligibility?			No	
	Date Applied:	Field:			
If yes,	please provide the follo	wing information:			
Certificat Type	e	Field		Effective Date	Expiration Date
1					
2					
3.					
4					
If you presently	hold or have ever held	an out-of state teaching certificate, g	jive the fo	llowing information	on:

ΤΥΡΕ	FIELD	EXPIRES	CERTIFICATE #	STATE

EDUCATION

List all colleges and universities attended beginning with the most recent.

College/University	City	State	Dates Attended	Graduation Date	Degree Earned	Major
Official transcripts from each	h college attended requi	ired prior t	o being recommende	ed for employment.		
Student Teaching Experie	ence					
System/State:			School:			
Grade Level:		S	Subject Area:			
Supervising Professor:		S	upervising Teacher:			
College or University:		C	uarter/Semester & `	Year Completed:		

EDUCATION WORK EXPERIENCE

Report in chronological order, beginning with the most recent position, all teaching and/or administrative experience whether in a public or private school, college or university. Report continuous work experience once. Work as a substitute teacher should be reported under "Other Work Experience."

From to Total years	System		School	
Address	City	State	Zip	Phone
Assignment		Supervisor		
From to Total years	System		School	
Address	City	State	Zip	Phone
Assignment		Supervisor		
From to Total years Mo. Yr. Mo. Yr.	System		School	
Address	City	State	Zip	Phone
Assignment		Supervisor _		
From to Total years	System		School	
Address	City	State	Zip	Phone
Assignment		Supervisor		
Please provide a copy of your evaluat	on for last year includir	ng your summative e	valuation and s	upporting documentation.
	OTHER W		NCE	
List all full-time non-teaching employ summer jobs unless they are significa			tribute to your s	success as a teacher. (Do not list
Employer Job Title	Address	Dates(from/	to)	Supervisor
Military: Branch: Dates:	Highe	est rank:	Type of	discharge:
PROFESSIONAL REFERENCES				
Even if you have a college placement include your former principals and sup supervisors, college supervisors, stud relatives. Phone interviews will be c	pervisors if you are an e ent teaching supervisor	experienced educator and/or major profes	. For beginning	g educators, include previous work
Name	Position	Em	ail	
Business phone	Home phone		_ Address	
Name	Position	Er	nail	
Business phone	Home phone		_ Address	
Name	Position	En	nail	
Business phone	Home phone		Address	

PERSONAL DATA			
List special honors earned during college and/or your profession:			
Circle all of the following for which you are interested in directing or coaching: Yearbook, Band, Chorus, Debate, Dr Cheerleading, Football, Baseball, Soccer, Basketball, Softball, Golf, Track, Cross Country, Other:			
Have you taught sufficient years in any other Georgia public school system to acquire tenure under the Georgia Fair YesNoIf yes, give system name and dates:	[.] Dismissa	l Law?	
Are you presently under contract with another system?YesNo If yes, system name and date contract expires:			
Are you a citizen of the United States of America? <u>Yes</u> If not, you must furnish a copy of your Residency Permit or other document allowing you to legally work in this country.	Permaner	nt	
Have you ever: (If the answer to any of the following is YES, an explanation MUST be attached.)			
Failed to have a contract renewed?	Yes	No	
Surrendered a teaching certificate/credential/license/permit, or had one denied, revoked, or suspended in any			
state or is there any investigation or adverse action now pending against you?	Yes	No	
Broken a contract with a school system?	Yes	No	
Been dismissed from employment with a school or been asked to resign?	Yes		
Been placed on disciplinary probation or suspended from a college or university?	Yes	No	
Received an unsatisfactory annual performance evaluation as a teacher?YesNo			
Resigned or been discharged from any position, including the armed forces, while under suspicion of having			
	Yes		
	Yes	_No	
under investigation for any such offense, other than a minor traffic offence?			
(DUI, DWI, BUI, BWI must be reported)			

Failure to accurately disclose information will be considered a violation of the Georgia Code of Ethics for Educators.

PERSONAL STATEMENT

Write a brief statement summarizing why you are interested in employment with the Long County School System.

SIGNATURE

Notice: 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 non-employment or immediate termination of employment.

I understand and agree to a criminal background check as provided by Georgia Law, the policies and rules of the State Board of Education and the Long County Board of Education. I agree to be fingerprinted by the appropriate law enforcement officials, and I agree to sign the 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 I may be issued only a temporary contract of employment pending the outcome of a criminal records check.

I authorize and request any former employer, superintendent of schools or designee, and immediate supervisor to furnish any information and opinions concerning the performance of my duties, including any evaluation of my performance, and the circumstances of my leaving that employment to the superintendent of schools or designee of this school system. I understand and agree that the information and opinions furnished will be confidential. By signing and submitting my application to the Long County School System, I grant a release of information and permission for the LCBOE to request evaluation documentation from previous school systems in which I have been employed to include all Teacher Keys Evaluation System (TKES) and Leader Keys Evaluation System (LKES) information.

By filing an application for employment with the Long County School System, if employed, I agree to abide by all the policies as set forth by the Long County Board of Education. I authorize full investigation of the information given in this application and consent to the representatives of the Long 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 Long County Board of Education and will not be returned to the applicant.

APPLICANT'S SIGNATURE DATE

Georgia Bureau of Investigation Georgia Crime Information Center

Consent Form

I hereby authorize the Long County School System to receive any Georgia criminal history record information pertaining to me which may be in the files of any state or local criminal justice agency in Georgia.

		Full Name (print)			
	Address				
Sex	Race	Date of Birth	Social Security Number		
Signature					
Date					

Special employment provisions (check if applicable):

- \Box Employment (Purpose code 'E')
- □ O.C.G.A § 20-2-211.1
- □ O.C.G.A. § 35-3-34.2 (1)

One of the following must be checked:

- \Box This authorization is valid for 90/180/____(circle one) days from date of signature.
- □ I, ______ give consent to the Long County School District to perform periodic criminal history background checks for the duration of my employment with this company.