

Name	_____	_____	_____	_____	_____
	Last	First	Middle	Maiden	
Present Address	_____	_____	_____	_____	_____
	Street	City	State	Zip Code	Area Code – Home Phone
Parent's or Permanent Address	_____	_____	_____	_____	_____
	Street	City	State	Zip Code	Area Code – Home Phone
Type	_____	_____	_____	_____	_____
Georgia Certificate					Area Code – Cell Phone

POSITION DESIRED

EARLY CHILDHOOD TEACHER (K-5)

MIDDLE SCHOOL TEACHER (4-8)
Specific Subjects and Level

_____ Primary K-5

SECONDARY TEACHER (9-12)
Specific Subjects and Level

SPECIAL EDUCATION
List Areas of Special Education

ADMINISTRATION

EXTRA-CURRICULAR ACTIVITIES

PRACTICE TEACHING

School Name _____

School Address _____

Principal _____

Supervising Teacher _____

Grade/Subject _____ Date Completed _____

Copies of college and/or university transcripts must be filed with the Personnel Department. Please arrange to have placement papers mailed to the Personnel Department.

Do you have a placement file? ____ Yes ____ No.
Please request that your file be forwarded to this office

CERTIFICATION

The Georgia Department of Education requires that all teachers, principals and other professional school personnel hold a Georgia Certificate. It is your responsibility to obtain and maintain your certificate in a current status.

Field in which certified or certification expected _____

Level(s) (T-4, PBT-5, etc.) _____ Expiration Date _____

Have you taken the Praxis I or G.A.C.E. Basic Skills Test? ____ Yes ____ No

Date taken _____ Pass ____ Fail

Have you taken the Praxis II or G.A.C.E. Test in your Field? ____ Yes ____ No

Date taken _____ Pass ____ Fail

EDUCATION

NAME OF SCHOOL & LOCATION (Include high school, college, graduate work and summer sessions taken)	DATES	TIME SPENT	Semester or Quarter Hrs. Credit	Degree or Diploma	MAJOR SUBJECT and Hours Credit	MINOR SUBJECT and Hours Credit

This space is provided for more information in regard to your interests, abilities, extracurricular activities, experience, etc., which have a bearing on your interest and qualifications for teaching.

REFERENCES

Please list persons qualified to answer questions concerning your professional preparation and competence. Do not list relatives or persons who can evaluate only your personality and character. Be sure to include your former administrators if you are an experienced teacher.

Name:	Position:	Complete Mailing Address:	Telephone:
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

ADDITIONAL INFORMATION

1. What is your philosophy as it pertains to education? _____

2. What value is standardized testing in Georgia Schools? _____

3. What is your opinion of classroom visitation by administrative personnel? _____

4. My strengths as a teacher include the following: _____

5. What is the main reason(s) for desiring employment in this system? _____

I understand that by filling this application, I am authorizing the Charlton County School System to conduct whatever background or criminal investigation about me they deem necessary. I further certify that all information contained in this application is correct to the best of my knowledge. I understand that misrepresentation of facts contained in this application may be reason not to employ or cause of termination of employment should I be hired. I authorize all former employers and references to release information about me to the Charlton County Board of Education. I understand that the following information is required for background check; such information will not be used to violate EEOC guidelines.

Social Security Number _____

Date of Birth _____

Signature _____

Date _____

INFORMATION FOR MAKING APPLICATION FOR TEACHING OR ADMINISTRATIVE POSITIONS

1. Thank you for your interest in Charlton County Schools. An application form is sent to any person who requests it regardless of any vacancies which might exist or the number of applications which we might have on file. The issuance of an application does not imply that a vacancy exists or that the applicant will be considered for immediate employment.
2. You will find two reference forms enclosed. Please fill out the top of each form and send on to each of two references. If you have experience as a teacher, you should send the reference forms to the principal or superintendent of your most recent employment. If you have no experience as a teacher, you should send the recommendations to your student teaching supervising teacher and the college supervisor.
3. Request that each college or university from which you graduated send us a copy of your transcript. Unofficial copies are acceptable prior to employment.
4. If you have a valid teaching certificate, attach a copy with the application.
5. In Georgia, each teacher must have a valid teaching certificate for the appropriate field. If you have any questions pertaining to eligibility for a Georgia certificate, contact the Professional Standards Commission, 200 Piedmont Avenue, Suite 1702, Atlanta, Georgia 30334-9032. The Charlton County Personnel Department will be happy to assist you in this process; however, it is the teacher's responsibility to obtain and continue to hold a valid certificate.
6. OCGA 20-2-212... "no local governing board shall employ any person as a teacher who has been discharged from the armed forces of the United States with a dishonorable discharge as a result of desertion or any person who has fled or removed himself from the United States for the purpose of avoiding or evading military service in the armed forces of the United States, excluding those who have been fully pardoned."
7. The application is complete when we receive the completed application form, two recommendations, and a college transcript from each institution where you have received a degree.
8. Charlton County is an Equal Opportunity Employer and does not discriminate because of race, color, sex, age, handicap, national origin, religion or marital status in its educational programs, activities, hiring or promotion practices.

Return Application to:

CHARLTON COUNTY SCHOOL SYSTEM
1259 Third Street
Folkston, Georgia 31537
(912) 496-2596 phone
(912) 496-2595 fax

CHARLTON COUNTY SCHOOLS
1259 Third Street
Folkston, GA 31537

To: _____
Name of Reference

Street	City	State	Zip Code
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I have submitted an application for a position with the Charlton County School System in Folkston, Georgia. I would appreciate it if you would check the following items in the appropriate column and mail to: Personnel Director, Charlton County Board of Education, 1259 Third Street, Folkston, Georgia 31537.

Last Name of Applicant	First Name	Middle Name
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Field/Position Applied For	Date
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I authorize the Charlton County Board of Education to investigate any information contained in my application. I further authorize all former employers and references to release information about me to the Charlton County Board of Education. I hereby waive my right to review this evaluation form.

_____	_____
Date	Signature of Applicant

Applicant rights are covered by the Civil Rights Act of 1964, Public law 90-202 and Title IX of the Education Amendments of 1972. This agency does not discriminate because of race, color, national origin, creed, religion, sex, marital status, age, or handicap in its programs and activities or employment practices and policies.

APPLICANT RECOMMENDATION FORM
CHARLTON COUNTY SCHOOL SYSTEM
An Equal Opportunity Employer
Folkston, Georgia 31537

LAST NAME OF APPLICANT _____ FIRST NAME _____ MIDDLE NAME _____

FIELD / POSITION APPLIED FOR _____ DATE _____

TO REFERENCE:

Please give your appraisal of applicant's qualifications as observed by you in college training or teaching experience. The information you give will be kept in confidence. Please rate this applicant as compared to others you have trained or supervised. Given a group of 100 teacher applicants, this candidate would rank as follows:

THE APPLICANT:		Poor Lowest 16%	Fair 34%	Good 34%	Excellent Top 16%	Not Known
I.	A. Demonstrates character and integrity					
II.	B. Plans Well					
	C. Uses a variety of techniques, methods and media effectively					
	D. Communicates clearly (written and spoken language)					
	E. Is knowledgeable of the subject being taught					
III.	F. Effectively organizes time					
	G. Demonstrates enthusiasm for teaching					
	H. Maintains appropriate classroom discipline					
	I. Is prompt, neat and accurate with records and reports					
	J. Is regular and punctual in attendance					
IV.	K. Helps learners develop a positive self concept					
	L. Cooperates with school officials and fellow teachers					
	M. Is well-groomed, neat, clean and dresses appropriately					
	N. Is adaptable					
	O. Maintains good student-teacher relationships					

How long have you known the applicant? _____ What was your position? _____

What was the applicant's position? _____

Would you employ the applicant if you had a vacancy in your system or school? YES NO Comments: _____

COMMENDATIONS (Optional)

If I had an opening, I would be enthusiastic about hiring this person. YES

I would be enthusiastic about this person teaching my child. YES

DATE _____ SIGNATURE _____ OFFICIAL POSITION _____

NOTE. The evaluator may write a letter of recommendation to accompany this form or in lieu of this form.

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1259 Third Street
Folkston, GA 31537

To: _____
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Street

City

State

Zip Code

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