

**MIDDLE GEORGIA  
REGIONAL EDUCATIONAL SERVICE AGENCY  
80 COHEN WALKER DRIVE  
WARNER ROBINS, GA 31088  
(478) 988-7170**

**APPLICATION FOR EMPLOYMENT**

NAME \_\_\_\_\_  
LAST FIRST MIDDLE

ADDRESS \_\_\_\_\_  
STREET CITY STATE ZIP

PRESENT POSITION \_\_\_\_\_

FOR A POSITION AS \_\_\_\_\_  
INDICATE AREA OF SPECIALIZATION

DATE \_\_\_\_\_ 20 \_\_\_\_\_  
SIGNATURE OF APPLICANT

E-MAIL ADDRESS: \_\_\_\_\_

RETURN APPLICATION TO:

MIDDLE GEORGIA REGIONAL EDUCATIONAL SERVICE AGENCY  
80 COHEN WALKER DRIVE  
WARNER ROBINS, GA 31088  
FAX: (478) 988-7178  
EMAIL: [icarreker@mgresa.us](mailto:icarreker@mgresa.us)

**Middle Georgia RESA does not discriminate on the basis of race, color, national origin, sex or handicap in any educational program, activity, or employment practice.**

1. Name In Full \_\_\_\_\_
2. Present Address \_\_\_\_\_ Phone \_\_\_\_\_
3. Permanent Address \_\_\_\_\_ Phone \_\_\_\_\_

4. **EDUCATIONAL AND PROFESSIONAL TRAINING\***

| NAME & ADDRESS OF SCHOOLS OR INSTITUTIONS ATTENDED | MAJOR COURSE OF STUDY | DEGREE, DIPLOMA OR CERTIFICATE EARNED | DATES | TIME SPENT | NUMBER OF CREDITS |
|--|-----------------------|---------------------------------------|-------|------------|-------------------|
| HIGH SCHOOL  |                       |                                       |       |            |                   |
| COLLEGE OR UNIVERSITY                              |                       |                                       |       |            |                   |
|  |                       |                                       |       |            |                   |
| GRADUATE WORK                                      |                       |                                       |       |            |                   |
|  |                       |                                       |       |            |                   |
| ADDITIONAL WORK                                    |                       |                                       |       |            |                   |
|  |                       |                                       |       |            |                   |

**\*NOTE – Applicant please see that College or University furnishes official transcripts, showing in detail the work done and credits received.**

5. Give full and accurate data regarding your

**TEACHING EXPERIENCE**

| NAME OF SCHOOL OR INSTITUTION – LOCATION | GRADES OR H.S. SUBJECTS | DATES | NO. OF FULL YEARS | PARTIAL YEARS IN MONTHS |
|--|-------------------------|-------|-------------------|-------------------------|
|  |                         |       | Yrs.              | Mos.                    |
|  |                         |       | Yrs.              | Mos.                    |
|  |                         |       | Yrs.              | Mos.                    |
|  |                         |       | Yrs.              | Mos.                    |
|  |                         |       | Yrs.              | Mos.                    |
|  |                         |       | Yrs.              | Mos.                    |
|  |                         |       | Yrs.              | Mos.                    |

6. Military Service

Branch \_\_\_\_\_ Induction \_\_\_\_\_ Discharge \_\_\_\_\_  
Month Day Year Month Day Year

7. List educational fraternities, professional organizations to which you belong \_\_\_\_\_

\_\_\_\_\_

List any organizational membership and offices held, if desired \_\_\_\_\_

\_\_\_\_\_

8. Present salary? \_\_\_\_\_ Least salary a year you would accept? \_\_\_\_\_

9. Georgia Certificate No. \_\_\_\_\_ What type? (T-5, T-6, etc.) \_\_\_\_\_

List areas in which you are now or will be certified \_\_\_\_\_

10. Add by letter any additional information that will give us a more complete estimate of your training, experience, character and ability.

11. When could you begin work here? \_\_\_\_\_

12. A personal interview is required of all applicants. Are you willing to come for an interview? \_\_\_\_\_

13. Social Security No. \_\_\_\_\_ Georgia Retirement No. \_\_\_\_\_

14. References: - Give at least three references, including especially superintendents and principals under whom you have taught, who have first hand knowledge of your character, personality, scholarship and teaching ability:

| NAME | MAILING ADDRESS & TELEPHONE NO. | OFFICIAL POSITION |
|------|---------------------------------|-------------------|
|      |                                 |                   |
|      |                                 |                   |
|      |                                 |                   |

15. What are the hobbies or outside activities in which you participate? \_\_\_\_\_

16. Have you taken the National Teacher Examination, Teacher Competency Test, or Praxis in Georgia? \_\_\_Y \_\_\_N

Date: \_\_\_\_\_ In other state \_\_\_\_\_ Date: \_\_\_\_\_

17. Have you taken the GACE in Georgia? \_\_\_\_\_ Date: \_\_\_\_\_ Test area: \_\_\_\_\_

18. Other Data – (All questions must be answered.)

**Each of the following questions must be answered with a “yes” or “no”. If any answer is “yes”, please attach an explanation, include final disposition of any investigations.**

Have you ever failed to have a contract renewed? \_\_\_\_\_

Have you ever resigned in lieu of non renewal or adverse personnel action? \_\_\_\_\_

Have you ever had a teaching credential denied, revoked, or suspended in any state? \_\_\_\_\_

Have you ever been convicted or pled nolo contendere to a felony or misdemeanor, including DUI? \_\_\_\_\_

Have you been charged with a felony or misdemeanor, including DUI, for which charges are currently pending? \_\_\_\_\_

Have you ever been accused of or investigated for allegations of sexual harassment? \_\_\_\_\_

Have you ever been accused and investigated for a crime of physical abuse, child abuse, or child deprivation? \_\_\_\_\_

Have you ever been reported to the Professional Standards Commission (PSC)? If so, what was the result? \_\_\_\_\_

19. Reason for leaving your present position \_\_\_\_\_

I authorize investigation of all statements contained in this application. I understand that misrepresentation or omission of facts called for is cause for dismissal.

Date \_\_\_\_\_ Signature: \_\_\_\_\_

# MIDDLE GEORGIA REGIONAL EDUCATIONAL SERVICE AGENCY

## ADDENDUM TO APPLICATION FOR CERTIFIED EMPLOYEES

1. 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 Control. 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.

2. Criminal Conduct

Have you ever been arrested, pleaded guilty or no contest to or been convicted of any criminal offense other than a minor traffic offense?

\_\_\_\_\_ Yes

\_\_\_\_\_ No

If so, please give detailed information below as to each offense, including the specific offense for which you were charged, the disposition of the offense and date, court, state and county where you were charged.

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**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 immediate termination of employment.**

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**Applicant's Signature**

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**Date**