Griffin-Spalding County Board of Education Application for Superintendent

Send to: Dr. Stephanie L. Gordy

 Attn: Superintendent Search
 Executive Director
 Griffin Regional Educational Service Agency (Griffin RESA)
 P. O. Box H
 Griffin, Georgia 30224

 Phone: 770-229-3247
 Fax: 770-228-7316
 Website: www.griffinresa.net

Applications must be delivered to Grffin RESA no later than 4:30 p.m. on April 24, 2015, or postmarked by midnight on the same date.

I. PERSONAL INFORMATION

Name			
Last	First	Middle	
Present Address			
City	State	Zip	
Daytime Telephone Number		Work Number	
Email Address			

II. PRESENT EMPLOYER INFORMATION

Present Employer		
Address		
City	State	_ Zip
Telephone Number	Title of Position	
Length of time in Current Position	Does your employ	er know of this application?
Amount of organization's annual bud	get for which you are responsible	\$
Number of employees in your organiz	ration How many i	report directly to you?
Do you hold or are you entitled to hol	d a Georgia leadership certificate	e issued by the Professional
Standards Commission? I	f yes, certificate number	
What level certificate? L-6 L	-7	

III. EMPLOYMENT HISTORY

Please list all experience both within and outside the field of education. List most recent employment first and continue in reverse chronological order. Use an attachment if necessary.

Date of		Organization	Reason for	
Service	Position	Address	Leaving	Supervisor

Have you ever been dismissed, suspended or terminated from any professional education or other employment?

Yes____ No____ If yes, please provide the date, name and address of the employer, and stated reason for the adverse action.

IV. EDUCATION AND PROFESSIONAL TRAINING (Use an attachment if necessary.)

Name of		Major/	Date Atter	ıded	
<u>Institution</u>	Address	Minor	From	То	Degree

V. HONORS AND AWARDS (List scholarships, articles authored, books authored, honorary degrees, citations, special recognitions, workshops conducted, major addresses, etc.)

VI. OUTSIDE INTERESTS AND HOBBIES (Use an attachment if necessary.)

VII. COMMUNITY ACTIVITIES (Use an attachment if necessary.)

VIII. REFERENCES

Please list the names of at least three individuals, one of whom should be a recent employer or supervisor, one a leader in your community (not necessarily connected with education), and one an educator who does not reside in your community. Do not list a relative. Please indicate if you have limitations on your references.

Name Position Present Address relepione	Name Position Present Address 10	lephone
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IX. CRIMINAL CONDUCT

Have you ever been convicted of any crime, entered a plea of guilty, nolo contendere, or suffered First
Offender Adjudication or any similar criminal or quasi-criminal determination or adjudications, other than
minor traffic violations? Yes <u>No</u>

If yes, please state the name and address of the Court, the date of the alleged offense, a description of the charges, and an explanation of the final action taken, including any fines, probation, imprisonment, first offender adjudication or similar disposition.

- Have you ever been charged with any crime or been named in an indictment, accusation or special presentment for any offense, other than a minor traffic violation? Yes <u>No</u>
 If yes, please explain.
- Are you currently under investigation, or have you ever been charged with any crime, or been named in an indictment, accusation, or special presentment of any offense, other than a minor traffic violation?
 Yes No If yes, please explain.
- Are you under investigation, or have you ever been charged with any violation of the Georgia Code of Ethics for Educators, or had any action taken against your certificate, or any similar professional inquiry in any other state? Yes <u>No</u> If yes, please explain.

- **X. QUESTIONS** (In your own writing, please respond to the following questions. Use an attachment if necessary. Please limit your responses to a maximum of one page for each question.
 - What do you perceive will be your greatest challenge in this position, and how will you address that challenge?

• How will you determine if you are being effective in the position of Superintendent?

• Describe the personal and professional attributes you possess that make you uniquely qualified for this position.

• Describe your desired relationship with the Griffin-Spalding County Board of Education in moving the school system forward.

I certify that the foregoing information in this application and statements are true and correct and authorize you to investigate all references listed and to secure additional information if necessary.

Signature of Applicant

Date

NOTICE: Any false information knowingly given is grounds for your application being voided.