



**Instructions for Completing**  
**Metro RESA Early Childhood Add-On**  
**One Year Certification Program**  
**Summer 2019 Cohort**

*This application is for teachers who currently hold professional certificate and need to add ECE certification **ONLY**. Please allow 10-14 days for your application to be processed upon receipt from our office.*

**Read all instructions before completing application. Please submit a COMPLETE application packet.**

- 1.) Print legibly or type application.
- 2.) Application packets that do not include **ALL** of the required documentation will not be processed. All documents should be submitted via mail or personally delivered to Metro RESA. Our office hours are 8:00 am – 3:30 pm Monday – Friday.
- 3.) Do not use PO Box addresses.
- 4.) If you wish to confirm that your application was received, please choose a mailing option that includes a delivery confirmation. We do not confirm applications received due to the volume of applications processed.
- 5.) Include an email address that you check often. **PLEASE NOTE THAT OUR PRIMARY METHOD OF COMMUNICATION WILL BE THROUGH THIS E-MAIL ADDRESS.**
- 6.) Be sure to sign and date the application.
- 7.) Before submitting application packet be certain your signature/name is on your check, money order, or cashier's check (make checks payable to Metropolitan Regional Education Service Agency or Metro RESA). ***Applications received without payment will NOT be processed!!***
- 8.) Be sure to include all required test scores.
- 9.) All candidates will be notified of their program status via the email address **you provide**. Please allow 10-14 days for your application to be processed.
- 10.) Early Childhood candidates **must** be teaching in a school that has at least three grades levels.
- 11.) Upon program approval, an applicant shall not become an active GaTAPP candidate unless he/she meets the following criteria:
  - Receives a teaching contract for the 2019-2020 school year serving at least 50% in the approved content field
  - Has at least one year left on a provisional certificate to complete the program
- 12.) **I verify that I have thoroughly read all of the instructions listed above.**

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(Signature)

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(Print Name)

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(Date)

(A copy of this form **MUST** be included with your application packet.)



Please list date here if previous applicant:

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**Metro RESA GaTAPP**  
**Application - ECE One Year Supervised Practicum**  
**Summer 2019**

Mail this application with **ALL** supporting documents to:

**Metro RESA GaTAPP**

**1870 Teasley Dr. SE**

**Smyrna, GA 30080**

**ATTN: Brad Baldwin**

**The following must be included with this application:**

(please initial on each line to indicate that the items are included with your application packet)

\_\_\_\_\_ Transcripts from all colleges and universities attended (do not have to be official as you are already certified)

\_\_\_\_\_ A minimum GPA of **2.75** is required. (Rounding up is **not permitted**)

\_\_\_\_\_ Bachelors/**Master's Degree Final GPA** (*please list highest degree here*)

\_\_\_\_\_ **\$75.00** application fee (check or money order) non-refundable (unless re-applying)

\_\_\_\_\_ GACE Content Assessment passing score report (or passing score on Praxis II prior to September 1, 2006) GACE exams (001) & (002)

\_\_\_\_\_ Current Resume`

\_\_\_\_\_ Two (2) letters of character reference (family members excluded) \_\_\_\_\_

\_\_\_\_\_ Copy of current certificate                      Certification ID \_\_\_\_\_

Validity dates: Date issued \_\_\_\_\_ Expires \_\_\_\_\_

\_\_\_\_\_ Copy of current contract

\_\_\_\_\_ Copy of last summative TKES evaluation

**Applicant Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

Name \_\_\_\_\_

(Legal name)

Address (no P.O. Boxes, please) \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_ County of Residence \_\_\_\_\_

Home phone \_\_\_\_\_ Cell \_\_\_\_\_ Work \_\_\_\_\_

Work Email \_\_\_\_\_ Personal Email \_\_\_\_\_

Social Security Number \_\_\_\_\_

Certification Field Sought \_\_\_\_\_  
(i.e. Middle Grades Math, Early Childhood Education, etc.)

Are you currently teaching? \_\_\_\_ Yes \_\_\_\_ No

If so, where? System \_\_\_\_\_

School \_\_\_\_\_ Subject \_\_\_\_\_

**Have you ever participated in a GaTAPP certification program before?** \_\_\_\_\_

**If so, where?** \_\_\_\_\_ **When?** \_\_\_\_\_

## EDUCATION

**List all colleges attended and dates (including graduate programs):**

Institution \_\_\_\_\_ Campus Location \_\_\_\_\_

Major \_\_\_\_\_ GPA: \_\_\_\_\_

Degree Awarded: \_\_\_\_\_ BA/BS Date Conferred \_\_\_\_\_

\*Was your college accredited at the time of your graduation? \_\_\_\_ YES \_\_\_\_ NO

Date Accredited \_\_\_\_\_ (Check date of accreditation at [www.ope.ed.gov/accreditation](http://www.ope.ed.gov/accreditation) )\*

Institution \_\_\_\_\_ Campus Location \_\_\_\_\_

Major \_\_\_\_\_ GPA: \_\_\_\_\_

Degree Awarded: \_\_\_\_\_ Date Conferred \_\_\_\_\_

Date Accredited \_\_\_\_\_

Institution \_\_\_\_\_ Campus Location \_\_\_\_\_

Major \_\_\_\_\_ GPA: \_\_\_\_\_

Degree Awarded: \_\_\_\_\_ Date Conferred \_\_\_\_\_

Date Accredited \_\_\_\_\_

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Have you participated in a Student Teaching experience? \_\_\_\_\_

If so, when and where? \_\_\_\_\_

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| <b>Applicant Signature</b> _____ <b>Date</b> _____ |
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**WORK HISTORY (most recent first)—Last 3 years (Include full work history on resume)**

Employer \_\_\_\_\_ Phone \_\_\_\_\_  
Position Held \_\_\_\_\_ Supervisor \_\_\_\_\_  
Reason for Leaving \_\_\_\_\_ Presently Employed Check Here \_\_\_\_\_  
Beginning Date \_\_\_\_\_ End Date \_\_\_\_\_

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Employer \_\_\_\_\_ Phone \_\_\_\_\_  
Position Held \_\_\_\_\_ Supervisor \_\_\_\_\_  
Reason for Leaving \_\_\_\_\_ Presently Employed Check Here \_\_\_\_\_  
Beginning Date \_\_\_\_\_ End Date \_\_\_\_\_

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Employer \_\_\_\_\_ Phone \_\_\_\_\_  
Position Held \_\_\_\_\_ Supervisor \_\_\_\_\_  
Reason for Leaving \_\_\_\_\_ Presently Employed Check Here \_\_\_\_\_  
Beginning Date \_\_\_\_\_ End Date \_\_\_\_\_

Are you legally authorized to work in the U.S. on a full-time basis? YES \_\_\_ NO \_\_\_

**Have you ever:**

|  |                |
|--|----------------|
| Been dismissed from employment?  | YES ___ NO ___ |
| Had credentials denied, revoked or suspended in any state?   | YES ___ NO ___ |
| Received an unsatisfactory performance evaluation from an Employer?  | YES ___ NO ___ |
| Been place on disciplinary probation or been suspended from any position?  | YES ___ NO ___ |
| Been or are you now under investigation for unethical conduct?   | YES ___ NO ___ |
| Been convicted of a felony, misdemeanor or pled <i>nolo contendere</i> , or are you now under investigation for violation of any such offense? (You must include ANY offense for which a fine of \$100 or more was imposed. Do not include any offense that occurred before your 18th birthday.) | YES ___ NO ___ |

If you answered 'YES' to any of the "have you ever" questions, you **MUST** attach an explanation and supporting documents. If you fail to complete **ALL** sections of this application, your application package will not be processed.

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**Applicant Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

[illegible]

*Applicant's Legal Signature*

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*Date*